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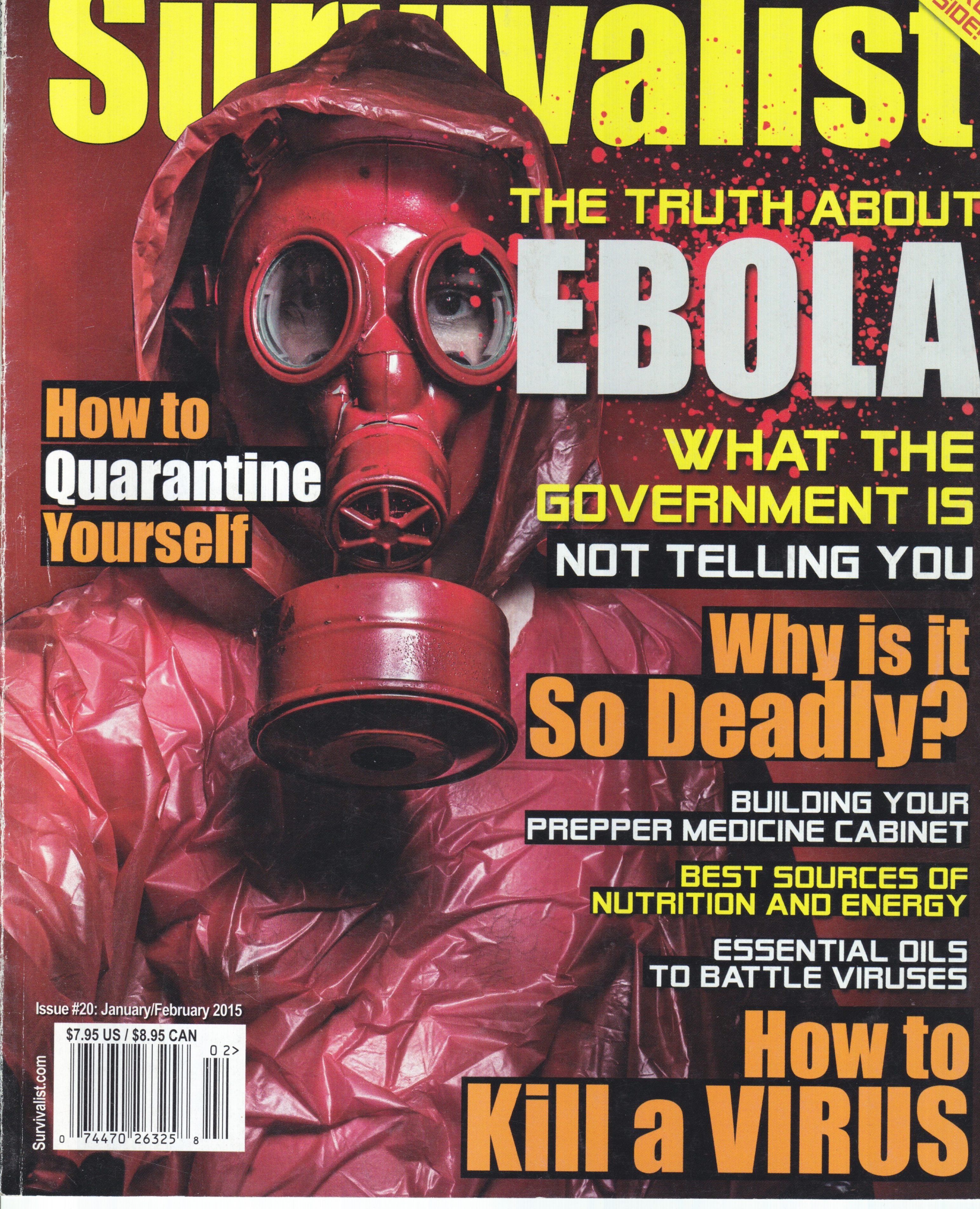

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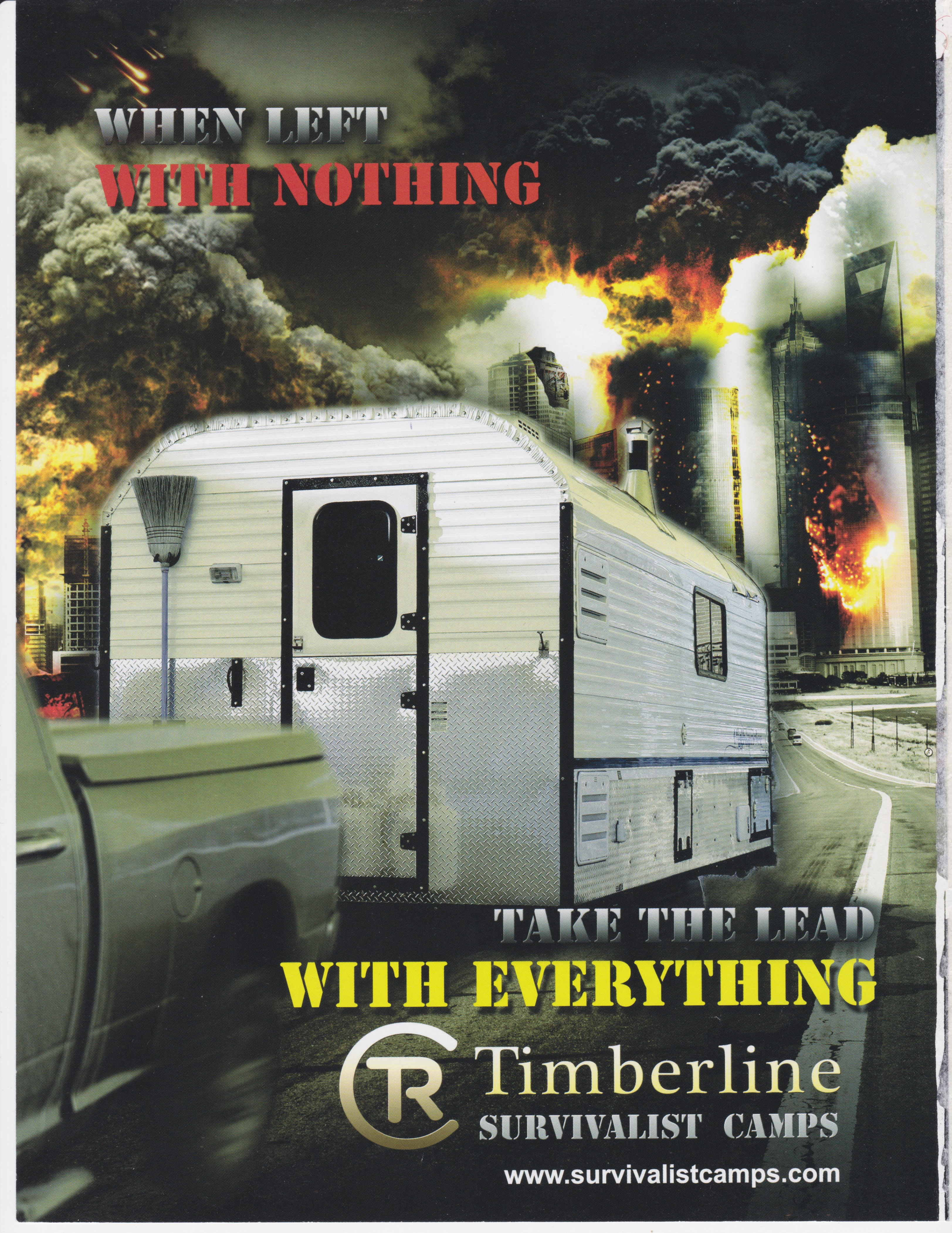
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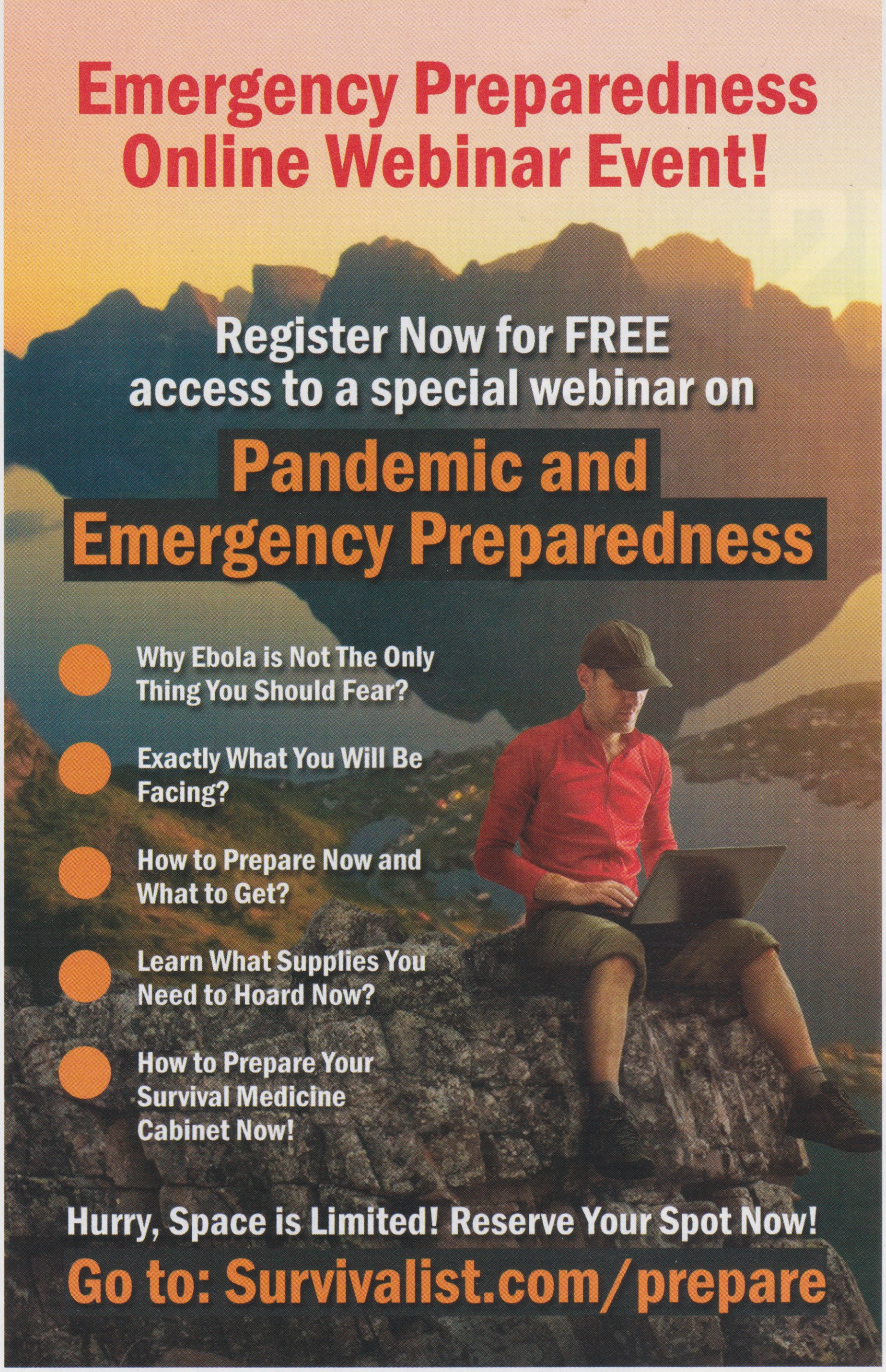

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WHAT IS EBOLA?

and Why is it so DEADLY?

What is Ebola?

EBOLA IS A RELATIVELY RARE TYPE OF VIRUS THAT HAS BEEN AROUND FOR MANY DECADES IN THE JUNGLES OF SUB-SAHARAN AFRICA. AS THE EBOLA VIRUS REPLICATES IN THE BODY, IT STIMULATES A VIOLENT REACTION THAT THEN LEADS TO A RAPID DEATH. THERE ARE FIVE DIFFERENT TYPES OF THE EBOLA VIRUS, WITH THE DEATH RATE VARYING WITH EACH STRAIN, FROM ZERO DEATHS IN THE RESTON STRAIN, UP TO THE CURRENT OUTBREAK OF THE MOST DEADLY ZAIRE STRAIN AT A 70 TO 90% RATE OF FATALITY. BECAUSE EBOLA IS A VIRUS, IT IS NOT KILLED BY ANTIBIOTICS.

SHELDON H. F. MARKS, MD

> “Ebola is a VIRUS, it is NOT killed by Antibiotics”

Where did Ebola start?

Ebola is thought to live harmlessly in massive populations of fruit bats in Equatorial African jungles. Occasionally and without warning, the virus can jump to other nonhuman primates such as gorillas or chimpanzees, triggering the waves of dozens of localized outbreaks over the past 40 years. As civilization expands deeper into the forests and jungles, more interactions with these infected reservoirs occur.

How do people catch Ebola?

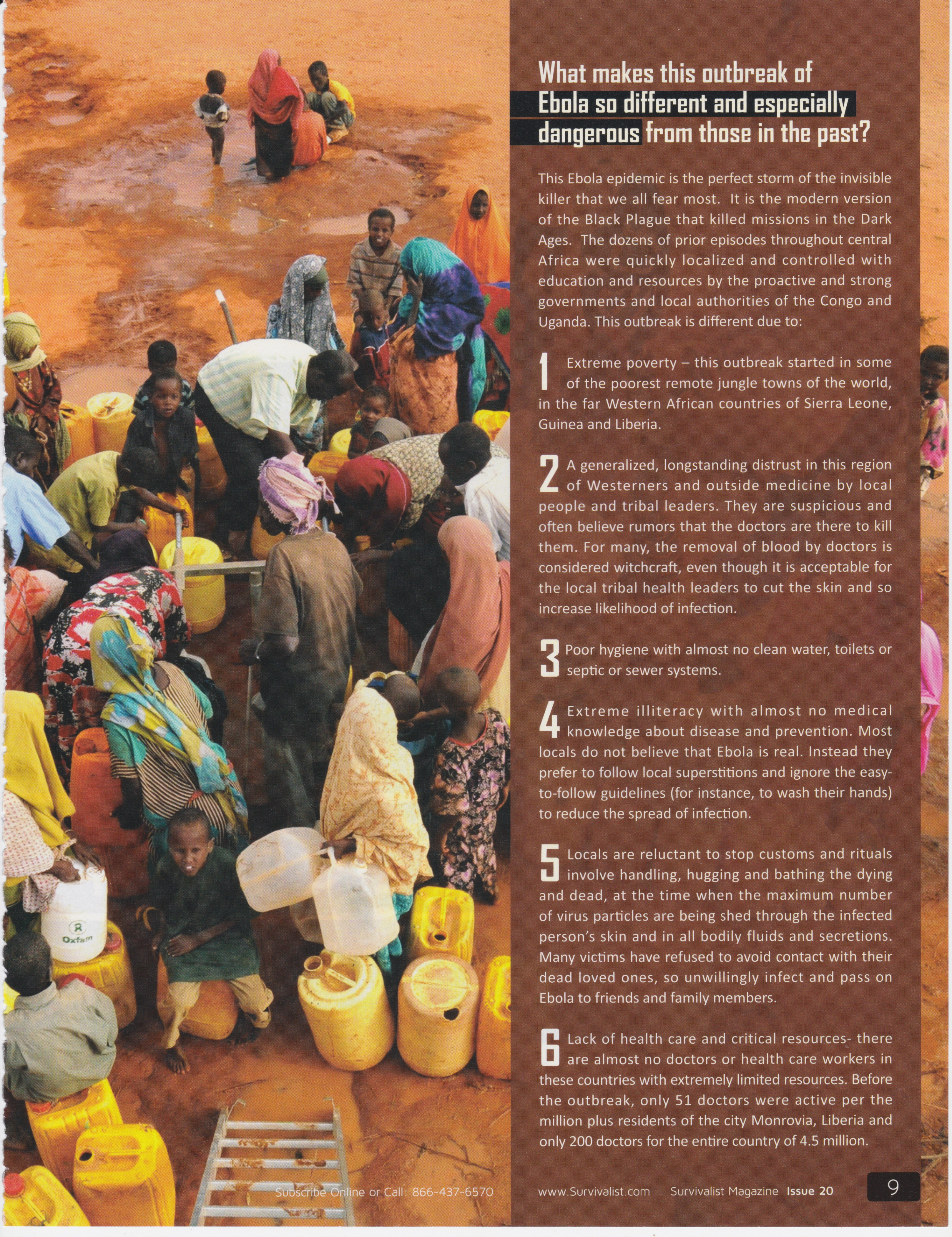
Humans become infected when they eat or handle "bush meat," the local delicacy of fruit bats or chimpanzees. Infected humans then pass the virus onto other humans through blood or other body fluids. A person cannot catch Ebola directly from the air or water. In most cases, these small hot zones of Ebola usually burn off, and normal life is restored in the villages.

Why is there so much fear & panic from this outbreak?

The media has been working night and day to ignite this generalized fear of Ebola, using headlines to inflame, pushing our panic buttons. Due to a general systemic ignorance of science, a collective mob mentality can easily be driven through deep panic. We become lemmings, following the lead of whoever screams the loudest. This mob mentality was demonstrated by the hysteria and panic that polio and HIV triggered during the epidemics of the '50's and '80's, respectively. And with the terrifying aspects of Ebola's rapidly escalating body count of gruesome deaths, most everyone is worried that it could progress to become the new killer pandemic we fear. To make matters worse, there is no vaccine, treatment or cure. At this point, Ebola is in the same vein of the mass killer of popular horror movies and bestselling books. And one last aspect of Ebola that makes it especially terrifying for humans - it leads to a painful, violent death for the infected who are kept alone, in total isolation, separated from loved ones with no physical contact.

We are a reactive society. We see a threat, panic, react and then become complacent...ignoring the past, waiting for the next threat. Want proof? We are now experiencing a comeback of outbreaks and deaths from measles, rubella and pertussis, all preventable diseases we thought we'd long ago cured.

Even Ebola is not new. There have been smoldering, intermittent outbreaks in central equatorial Africa since the mid 1970's. So why suddenly are we starting to look for vaccines? Why did no one develop a vaccine over the past 40+ years, like we did for Yellow Fever? For some reason, we have become complacent to killer diseases all around us - hepatitis C, HIV, measles, rabies. Perhaps our general apathy is due to the fact that, until now, Ebola was confined to isolated jungle villages in the middle of someplace far away in the jungles of central Africa.



What makes this outbreak of Ebola so different and especially dangerous from those in the past?

This Ebola epidemic is the perfect storm of the invisible killer that we all fear most. It is the modern version of the Black Plague that killed missions in the Dark Ages. The dozens of prior episodes throughout central Africa were quickly localized and controlled with education and resources by the proactive and strong governments and local authorities of the Congo and Uganda. This outbreak is different due to:

1 Extreme poverty – this outbreak started in some of the poorest remote jungle towns of the world, in the far Western African countries of Sierra Leone, Guinea and Liberia.

2 A generalized, longstanding distrust in this region of Westerners and outside medicine by local people and tribal leaders. They are suspicious and often believe rumors that the doctors are there to kill them. For many, the removal of blood by doctors is considered witchcraft, even though it is acceptable for the local tribal health leaders to cut the skin and so increase likelihood of infection.

3 Poor hygiene with almost no clean water, toilets or septic or sewer systems.

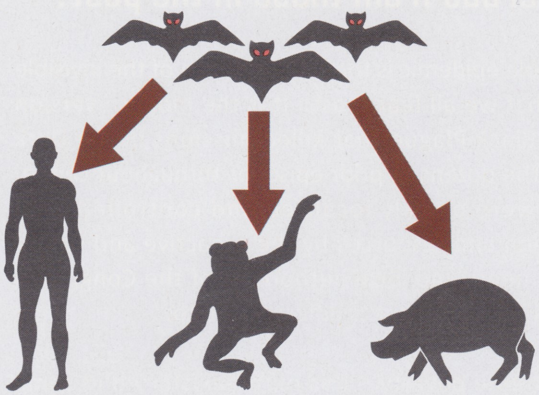
4 Extreme illiteracy with almost no medical knowledge about disease and prevention. Most locals do not believe that Ebola is real. Instead they prefer to follow local superstitions and ignore the easy-to-follow guidelines (for instance, to wash their hands) to reduce the spread of infection.

5 Locals are reluctant to stop customs and rituals involve handling, hugging and bathing the dying and dead, at the time when the maximum number of virus particles are being shed through the infected person's skin and in all bodily fluids and secretions. Many victims have refused to avoid contact with their dead loved ones, so unwillingly infect and pass on Ebola to friends and family members.

6 Lack of health care and critical resources- there are almost no doctors or health care workers in these countries with extremely limited resources. Before the outbreak, only 51 doctors were active per the million plus residents of the city Monrovia, Liberia and only 200 doctors for the entire country of 4.5 million.

Ebola virus

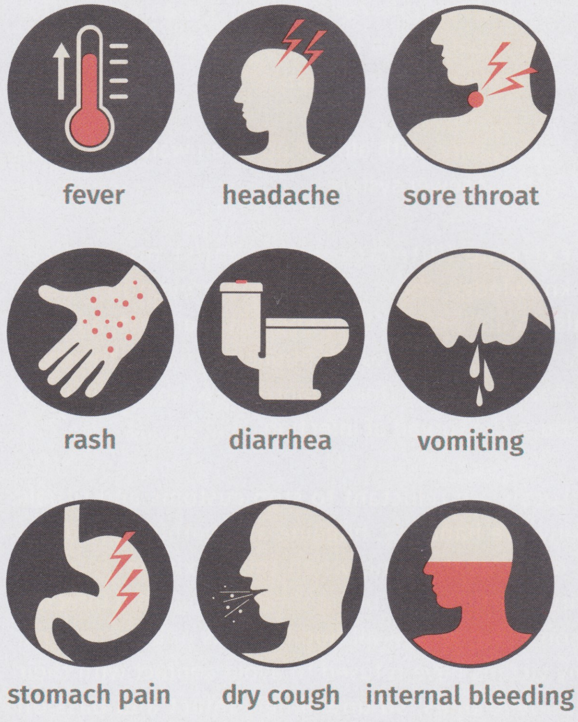
natural Ebola virus hosts



Ebola virus infects humans, monkeys, pigs

2–21 INCUBATION PERIOD DAYS

SYMPTOMS OF EBOLA



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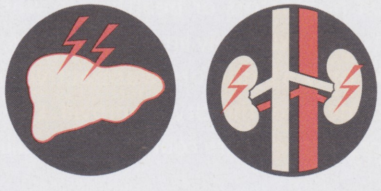


How long does it take to catch Ebola?

Once enough viral particles enter the body, incubation of an Ebola infection can take from 2 to 21 days, with an average of about 6 to 10 days. The larger the amount of virus you are exposed to, the faster the incubation. Most symptoms do not appear for about a week, while the virus grows and replicates in the tissues. Once it reaches a critical mass, the victim then shows symptoms as the virus progresses rapidly to destroy tissues and organs. When the lining of blood vessels are damaged, they become leaky, and the person will begin to bleed from all orifices.

What are the signs and symptoms should I watch out for?

Early signs that you have Ebola are no different than those of any viral infection, such as the flu. In fact, these nonspecific symptoms are resultant of the fact that the body is fighting off the virus.

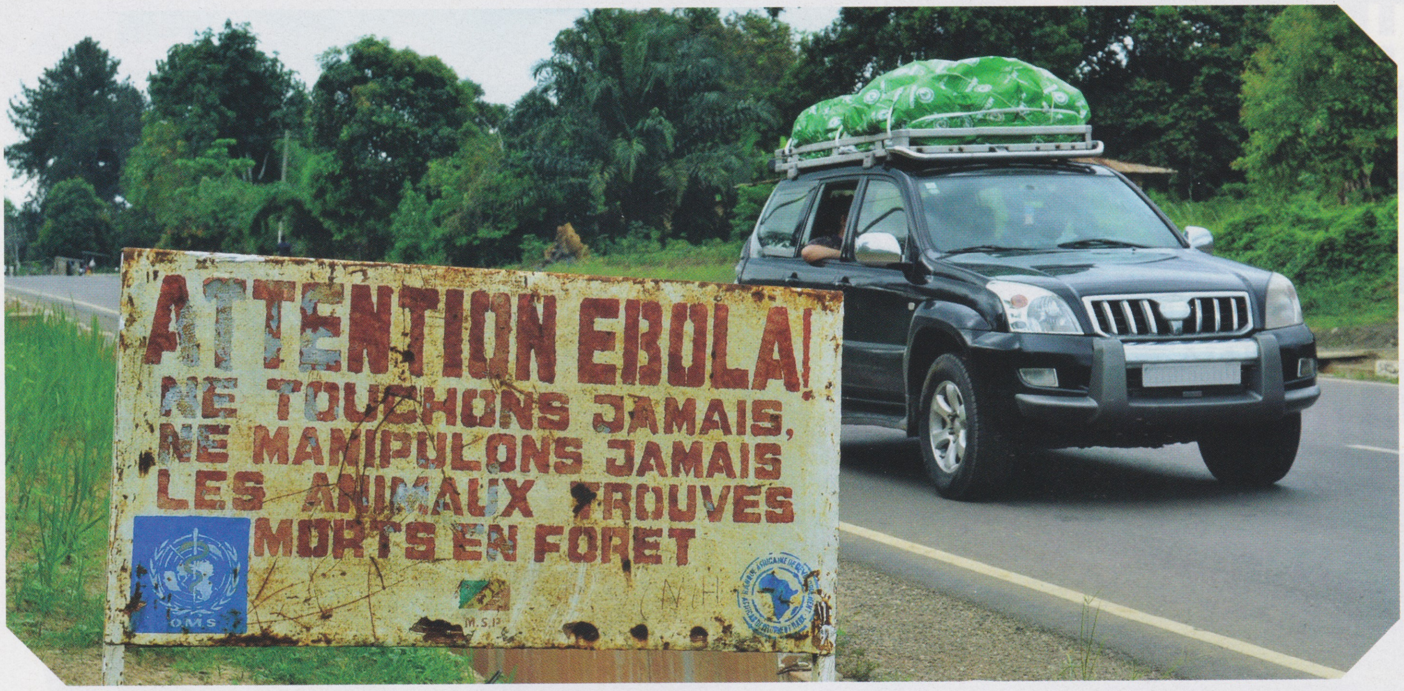
Once the virus hits a critical phase, most victims will experience a sudden onset of fever and severe headache, body aches, cough, sore throat, nausea and extreme vomiting, severe abdominal pain and violent and explosive diarrhea. Some victims can lose up to 10 to 15 liters of fluid a day. If not replaced quickly, then the dehydration alone can kill. Less than half of Ebola victims actually develop the more extreme symptoms – the dramatic bleeding from the eyes, nose, mouth, with vomiting and diarrhea, as the internal organs and intestines essentially melt. This severe degeneration is perhaps the most dramatic and scary aspect of Ebola infection.

Those that survive actually have long lasting immunity from future infections of that same strain. We do not know if immunity to one strain equates to immunity from others strains of Ebola. The blood of these survivors is being used to transfer passive immunity of antibodies to recently infected patients.

DIED OF EBOLA 5000+

Who dies from Ebola?

Studies of past Ebola outbreaks suggest that best survival resides in the most resilient, young and healthy individuals – those of whom are less than 21 years of age – with strong, and otherwise healthy, immune systems. The highest death rate is in those more than 45 years old. Another factor is the viral load. The more virus you are exposed to and the more you have in your body, the worse off you are. The last factor determining survival is the timing and quality of supportive medical care. Obviously the better the care and the sooner it is started, the better the chances of recovery.



Why is the death rate from the different strains so varied?

Each strain of the Ebola virus is genetically different. What makes Ebola especially challenging is that the virus frequently mutates, so each infected person can carry a slightly different variation than every other infected person. To add to the problem, the Ebola virus actually produces a decoy protein to trick and confuse the body's immune response. This all makes developing targeted treatments and vaccines even more challenging.

How do I know it's the flu and not Ebola?

There are only three ways to contract Ebola. If you, like so many millions, come down with the flu, and you don't have any of these risk factors, then chances are you have the flu. It would be wise to get the flu vaccine, as even the flu can kill up to 30,000 people each flu season. *(Publisher's note: There is much controversy over the compounds found in the flu vaccine and its long-term effects, especially on children. Get educated on vaccines before following the herd. And be weary of any chemical or vaccine the government tells you is safe)*

Ebola virus, though very deadly and very contagious, can only be contracted through mucous membranes or broken skin. If you have not done any of the following, then you likely do not have Ebola:

1 Handled or eaten the blood, fluids or meat of infected fruit bats or non-human primates, such as chimpanzees or gorillas.

2 Traveled to "at risk" countries in West Africa in the past 21 days and been in extremely close and extended proximity to sick Ebola patients.

3 Handled dying and dead Ebola patients and/or their bodily fluids, a common West African death and burial custom. Of course, health care workers that care for patients with Ebola are at risk and should be on high alert for any flu-like symptoms.

Can Ebola mutate and become airborne?

Experts say that because of the specific structure of the Ebola virus, it cannot mutate to become airborne like other viruses or infections. It can, however, live in tiny micro-droplets of saliva or mucous. To "catch" it though, you would need to be directly in front of the infected person that coughed or sneezed.

How can they stop Ebola in West Africa?

Stopping this epidemic is all about education and finding a way to get the local people to believe the message. The challenge is to convince people to present early to an Ebola center to see if they even have Ebola.

Another challenge is for the locals to avoid the eating and handling of fruit bats or bush meat. To put the this in perspective, this would be like telling Americans to stop eating hamburgers and fries because of a mystery disease we do not believe exists.

Lastly, again through education, is to persuade the people to at least temporarily alter their illness, death and burial customs. This is not an easy task.

And, to do all this while still providing quality health care and ensuring safety for the volunteer doctors and nurses. The good news is that once a town, community or region is free of the virus for 42 days - two full incubation cycles - then they are declared Ebola-free.

What is isolation vs. quarantine?

Isolation is what you do to a person diagnosed with Ebola, placing them in a sealed environment during their treatment so that no one else can become infected. Quarantine is what you do to someone that may be exposed to the virus. Since a person is not infectious until after the symptoms of fever begin, it is considered safe to closely monitor people at risk. The onset of a fever precedes the contagious stage of Ebola. This allows the monitors to identify those that are a threat and in need of isolation and treatment before they can spread the disease. How closely we monitor people depends on the level of risk. Consider Thomas Eric Duncan who died in Dallas, Texas, and how many thousands upon thousands of people he was in contact with – those on his multiple flights and, for days after he became extremely ill, all of his family and friends at his apartment; not one became infected. The two nurses who contracted Ebola were different, as they were involved in his care at the end of his life, when he was at the peak of viral infectiousness.

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Why can't we quarantine everyone at risk and cut off all flights from West Africa?

Seems to be a logical solution to a common question. Two points as to why the experts think this will not help or make a difference. We are not a small village. We have very porous borders.

1 Experts say it won't work. Just look at Mr. Duncan and his travels. His flight actually went from Liberia to Brussels, Belgium, and THEN to Dulles Airport outside of Washington, DC, and then finally to Dallas. A ban of the few direct flights from these countries to the United States would not have stopped him from entering.

2 If we quarantine those arriving from certain countries or those exposed to Ebola, people will be dishonest. No one in their right mind will tell the truth, if we force everyone who has traveled to certain areas of the world into quarantine for 21 days. In fact, Mr. Duncan is reported to have denied his past exposure to people with Ebola. Just as bad, people may fly into other airports and travel by car or bus to their final destination, bypassing the screening sites.

How do I keep from catching Ebola or any viral infection?

First, wash your hands frequently with soap and water or alcohol-based hand lotion, killing any germs on your hands. And, since we tend to touch our faces many times a minute, this will reduce the chances of delivering infectious viral germs into our body from hand to mouth, eyes or nose.

Second, stay away from sick people. You would be surprised how many people, ill with the flu or cold, still go to school or work, shop at the mall or go to a movie.

Treatment for Ebola infection

Currently, medical professionals will provide early onset supportive measures to address massive dehydration from fluid loss, correct metabolic changes, treatment for infections and administer antibodies to Ebola from recovered survivors. This may or may not work. Potential future treatments are very exciting – one possibility is the use of tobacco plants as "genetic factories" to recreate the antibodies used to fight and kill the Ebola virus.

So what do I do?

Unless there is a dramatic change in the virus or you care directly for Ebola victims, it is unlikely you or anyone you know will die of Ebola. What you can do is use this fear of a pandemic and the societal collapse to drive you to think, talk and prepare for an all-hazards situation. Gather the collective knowledge, expertise and wisdom from others to plan for the most likely, as well as most devastating, scenarios. Don't fall into the trap of our culture of complacency. You and your family, neighborhood, community can become more responsive and resilient to any event, anticipated or not. If you pursue an all-hazards attitude of preparedness, then you will be ready for whatever natural catastrophe, pandemic, terrorist attack or disaster comes your way.

J.D. HAYES

Prior to the importation of the deadly Ebola virus into the United States by Liberian national, Thomas Eric Duncan, in September 2014, most Americans would have never believed that their state-of-the-art health care system was not prepared to handle it. In fact, most of us would have said that our health care system, despite its warts, could handle anything -- from cuts and bruises to major surgeries and even to treating the world's most deadly diseases.

We were wrong, but not for the reasons you think.

WHAT THE GOVERNMENT ISN'T TELLING YOU ABOUT EBOLA

OUR HEALTH CARE SYSTEM – traditional and alternative -- really is the world's best; our medical technology top-notch. Our doctors and nurses are among the most highly trained, and our research capacity, thanks to a plethora of well-funded institutions of higher learning, is almost limitless. The "failure" of effective Ebola treatment, then, has not come from our medical facilities or the research institutions; it has come from a familiar source of failure: *Our federal government...*

Even as we go to print, the government's health agencies and officials are still trying to get up to speed about Ebola: How it is contracted, how it is spread, who is most at risk and why, how best to contain it, what makes it spread from region to region, how long of an incubation period the disease really has, and so forth. As an example, on that last point -- incubation periods -- the Centers for Disease Control and Prevention (CDC) has been fixated on a 21-day incubation period. However, as alternative health website, NaturalNews.com, reported on Oct. 15, the World Health Organization stated that Ebola incubation periods could take as many as 42 days in a small number of infected patients. [1]

"This may be the single most important -- and blatantly honest -- research report released by any official body since the beginning of the Ebola outbreak," wrote Natural News editor Mike Adams, the Health Ranger. "The WHO's 'Ebola situation assessment' report... explains that only 95% of Ebola infections experience incubation within the widely-reported 21-day period." The WHO report also stated that "98% have an incubation period that falls within the 1 to 42 day interval." This isn't what you would call common knowledge.

WHAT'S THE REAL STORY?

There are other signs that the government is still trying to come to terms with this deadly form of hemorrhagic fever. An Associated Press (AP) report from Oct. 29 said that the U.S. health care system was so unprepared for Ebola and so short on resources to handle it that "even small clusters of cases could overwhelm parts of the system." [2]

The AP examined the U.S. health care system -- hospitals, emergency services networks and other aspects of care delivery and preparation -- and found results that were "worrisome."

"Supplies, training and funds are all limited. And there are concerns about whether healthcare workers would refuse to treat Ebola victims," the AP reported.

Also in recent weeks, the CDC has been more forthright about the hazards of the deadly virus -- which, as this magazine went to press, has killed north of 5,000 people in West Africa, making it the deadliest Ebola outbreak since the disease was discovered in 1976. Many Americans remember when Dr. Thomas Frieden, head of the CDC, said that the virus could not be spread through casual contact, such as sitting next to an infected person on a bus (President Barack Obama echoed that sentiment). At the same time, however, Frieden also said that persons suspected of carrying the virus should not be riding buses -- or subways, or taxi cabs, or any other form of mass transit.

Why would the CDC chief make such a seemingly contradictory statement? As it turns out, just a few weeks later, in the latter part of October, the CDC published an info sheet online which said, essentially, that the virus could indeed be spread through aerosolized droplets (from a sneeze, for example). [3]

"Airborne spread happens when a germ floats through the air after a person talks, coughs, or sneezes. Germs may land in the eyes, mouth, or nose of another person," said the info sheet.

"If a germ is airborne, direct contact with the infected person is NOT needed for someone else to get sick. Airborne spread diseases include: chickenpox, tuberculosis."

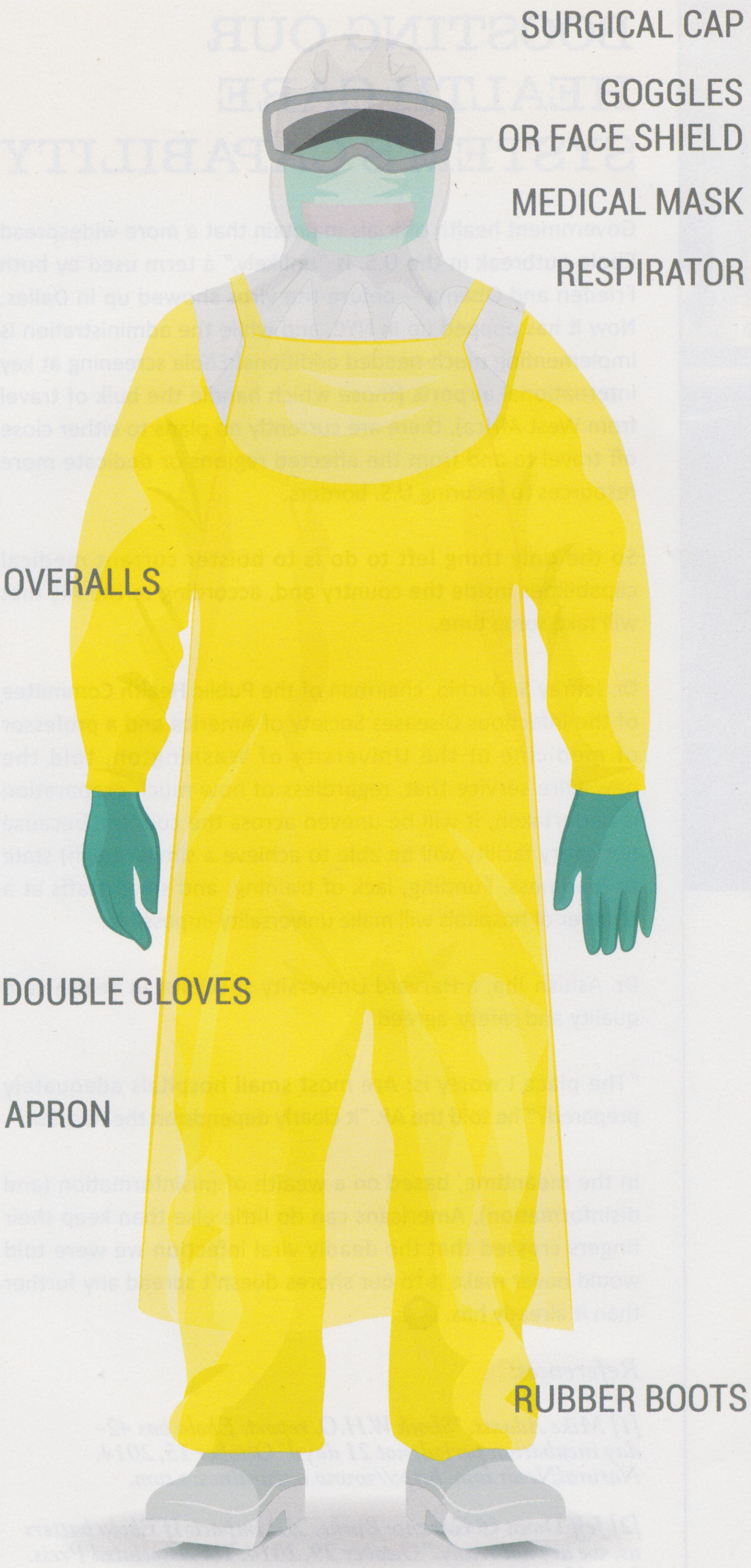
But, it added:

"Droplet spread happens when germs traveling inside droplets that are coughed or sneezed from a sick person enter the eyes, nose, or mouth of another person. Droplets travel short distances, less than 3 feet (1 meter) from one person to another.

"A person might also get infected by touching a surface or object that has germs on it and then touching their mouth or nose.

"Droplet spread diseases include: plague, Ebola."

The CDC's differentiation between "airborne spread" and "droplet spread" appears, on the surface, to be negligible, as if the agency is splitting hairs. Either way, the virus can be moved in between infected and uninfected patients through the air.



BIOHAZARD PROTECTIVE SUIT

MAKING PREPARATIONS

A great deal of government preparation activity is also unfolding -- activity which might not necessarily mean much, except that the actions don't appear to align with government rhetoric.

Virtually everyone, from the president on down, in the Obama administration has tried to downplay the potential for a major Ebola outbreak in the United States. That downplaying continues today. But as of this writing, there have already been four cases of Ebola in the U.S. -- Duncan, a pair of Dallas-area nurses who took care of him and a New York City doctor who contracted the disease while working in West Africa with Doctors Without Borders.

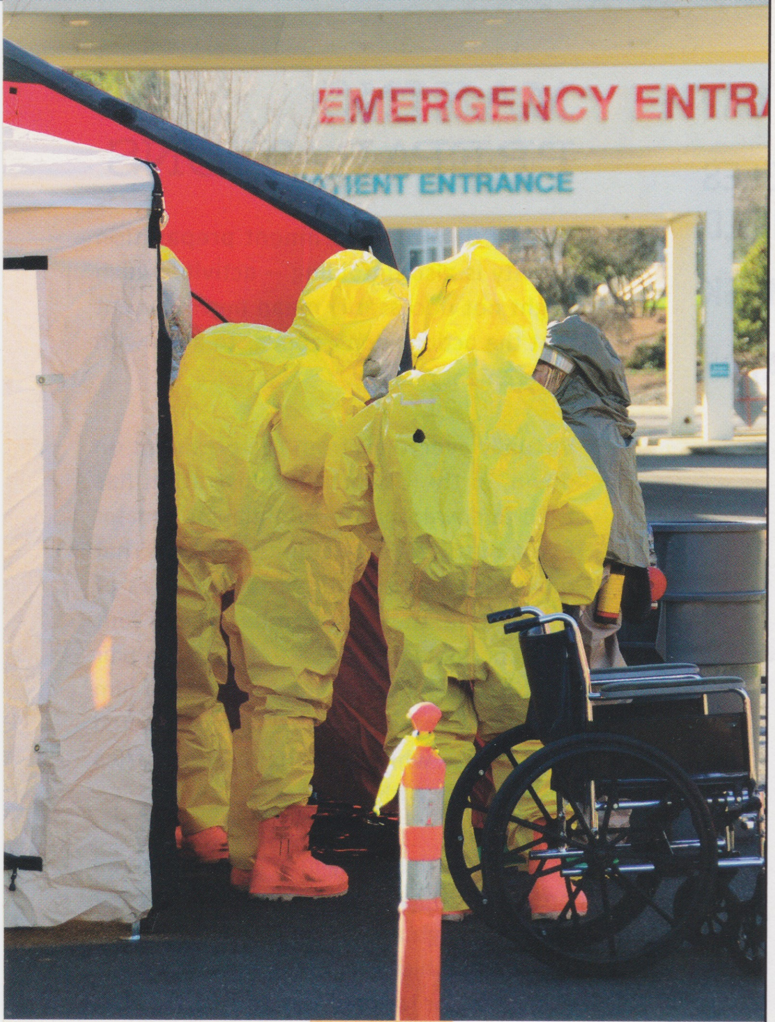
In addition, the government has placed an order for an astonishing 1 million hazmat suits, through a company called Lakeland Industries, which is based in New York state. I reported for NaturalNews.com on October 31 [4]:

The hazmat suit manufacturing business, normally predictably mundane, has taken off in recent weeks, thanks to the worsening Ebola crisis, but the number of suits ordered from one company certainly makes one pause and ask: "Just what aren't we being told yet about the spread of this deadly disease?"

"In anticipation of the worsening of the Ebola crisis, on September 12 the Company announced its intent to increase manufacturing capacity for specialty protective suits to be worn by health care workers and others being exposed to Ebola," said a company press release. "The Company has been experiencing significant interest globally for its ChemMAXR and MicroMAXR protective suit lines.

The order was so massive that the company said it would have to hire and train new workers, secure extra resources in order to fill the order, and put on additional manufacturing capacity.

BOOSTING OUR HEALTH CARE SYSTEM'S CAPABILITY


EMERGENCY ENTRA
TIENT ENTRANCE

Government health officials maintain that a more widespread Ebola outbreak in the U.S. is "unlikely," a term used by both Frieden and Obama -- before the virus showed up in Dallas. Now it has popped up in NYC, and while the administration is implementing much-needed additional Ebola screening at key international airports (those which handle the bulk of travel from West Africa), there are currently no plans to either close off travel to and from the affected regions or dedicate more resources to securing U.S. borders.

So the only thing left to do is to bolster current medical capabilities inside the country and, according to the AP, that will take some time.

Dr. Jeffrey S. Duchin, chairman of the Public Health Committee of the Infectious Diseases Society of America and a professor of medicine at the University of Washington, told the newswire service that, regardless of how much preparation is undertaken, it will be uneven across the country, because not every facility will be able to achieve a similar (high) state of readiness. Funding, lack of training, and small staffs at a number of hospitals will make universality impossible.

Dr. Ashish Jha, a Harvard University specialist in health care quality and safety, agreed.

"The place I worry is: Are most small hospitals adequately prepared?" he told the AP. "It clearly depends on the hospital."

In the meantime, based on a wealth of misinformation (and disinformation), Americans can do little else than keep their fingers crossed that the deadly viral infection we were told would never make it to our shores doesn't spread any further than it already has.

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[1] Mike Adams. "Shock W.H.O. report: Ebola has 42-day incubation period, not 21 days!" October 15, 2014. NaturalNews.com. http://www.naturalnews.com.

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WHY IS THIS EBOLA OUTBREAK DIFFERENT FROM PAST OUTBREAKS?

SHELDON H. F. MARKS, MD

WHERE IT BEGAN.

Sometime in the winter of 2013, in a small jungle village in southeast Guinea, near the border with Sierra Leone and Liberia, a 2-year-old boy named Emile Ouamouno became "patient zero" in the latest Ebola outbreak after becoming infected with the killer Zaire strain. How he picked up the virus will remain a mystery. Did he handle or eat a diseased fruit bat or come in contact with infected chimpanzee meat? We will never know. Shortly after, he became violently ill and died. Soon after Emile died, his mother, sister and grandmother also died. Then the local doctor and others who had attended their funeral became sick and died, spreading the deadly virus to other villages. Emile became the first domino to fall in this exponentially growing Ebola crisis that has killed and is killing its victims by the thousands with no end in sight. Officially declared the 25th outbreak, this Ebola epidemic was not even recognized for several months until March of 2014.

There have been dozens of past outbreaks throughout small remote villages throughout sub-Saharan Africa that flare up, kill and burn-out. There was even an episode in the Philippines and one in the US. Sure there have been hundreds of deaths with most of these outbreaks, but nothing like the current epidemic, with the end nowhere in sight. Something is very different and dangerous with this outbreak.

WHEN DID IT START?

The first cases of Ebola in 1976 actually involved two simultaneous outbreaks, in two totally separate and isolated locations. One was up in the deep jungles of northern Zaire (now the Democratic Republic of Congo) and one in southern Sudan, 740 kilometers away. Though they were both variants of Ebola, named after the river in Zaire where Ebola was first described, the two variants were different in their death rates. The Zaire strain can kill up to 90% of those that become infected, where the Sudan strain kills around 50%. It is unknown what triggered these two episodes to occur at the same time in different locations from genetically different strains.

Since then, there have been 24 known identified outbreaks, each with a limited number of infections and deaths, all with the same rapid onset and gruesome loss of life. Up to this point, just as quickly as they'd appear, each outbreak of Ebola has faded, disappearing back into the jungle. Until now.

WHAT IS THE SOURCE OF THE EBOLA VIRUS?

Thought to thrive harmlessly in the African fruit bat population, the virus can jump to infect and kill other non-human primates, especially chimpanzees and gorillas. In fact, more than 5000 gorillas have died in one sanctuary alone. There are estimates that a third of the entire gorilla population has been killed and a quarter of chimpanzees in the wild. How and why this happens has yet to be identified.

WHY DID IT TAKE SO LONG TO KNOW THIS WAS ANOTHER OUTBREAK OF EBOLA?

There were a number of reasons for the delay in recognizing this outbreak. For one, patient zero's symptoms of fever, nausea and vomiting are surprisingly common in southeast Guinea and not usually a sign of concern. In fact, Ebola imitates so many other viral infections such as malaria or Lassa Fever that no one even suspected Ebola. Because it is a very remote, isolated area of the world, outside communications with others, including public health officials, are limited. Add to this extreme poverty, porous borders, a high level of illiteracy complicated by minimal understanding of health and disease, and further compounded by a general distrust of outsiders and medical professionals, even their own community doctors, and you have yourself a recipe for epidemic. As a result of the inability to recognize the disease as Ebola, any opportunity for rapid containment and control was lost. By the time the world realized that this was a new Ebola outbreak, it had already spread throughout the region and was gaining traction, fast.

WHY DO THE LOCALS NOT TRUST DOCTORS THERE TO HELP THEM?

We have all read in horror how local villagers have attacked local community Ebola care centers and forcibly removed all the sick and dying, looted mattresses and medical supplies and, in some instances, even killed the doctors and nurses, as happened in September in the village of Womme, Guinea, when a delegation of doctors and journalists were attacked by locals, resulting in 8 dead and 21 injured.

Why this distrust? Why do some locals react violently to those who are trying to save their lives?

The general population of some African villages believe that when the doctors arrive, people die. They don't understand that the doctors are following contacts and the newest outbreaks. What the very superstitious locals see is a clear, direct link between the arrival of outside doctors and high numbers of loved ones dying a horrible, bloody death. In the past, there were rumors that the doctors were removing and selling off body parts for profit. No wonder the local people did not want to announce this new killer was on the loose in their villages.

WHAT MAKES THIS AN ESPECIALLY DANGEROUS OUTBREAK?

This epidemic of Ebola virus is a variant of the Zaire strain. Of the 5 known strains, Zaire is the deadliest. And since the Ebola virus changes and mutates with each person it infects, the virus has the potential to become even more infectious or fatal. Scientists note that it can take less than 10 virus particles to infect someone. To wrap your mind around how potent this virus is, one cc of blood in a dying Ebola patient contains about 10 billion viral particles. So even the tiniest droplet of blood, saliva, vomit, semen or diarrhea can be fatal.

The villages within these mountainous regions are interconnected by poorly maintained roads, and the borders between the countries are essentially nonexistent up in the rainforest. This means that health workers risk their lives simply to access the affected villages, and the virus has free reign to travel across borders, making its spread inevitable.

Because this is such a resource-poor region of the world, even when patients are diagnosed early, the medical facilities, trained doctors and nurses and supportive care available to patients are few and far between. The key to containing and controlling any outbreak is education and training to eliminate risky behaviors and promote early detection and care. In the current widespread, remote region of Africa this is especially a challenge. Money is limited, as are resources or government leadership to pay for education and care.

WHAT LOCAL CUSTOMS MAKE THIS OUTBREAK SO BAD?

Even when contacted by local officials to try and track contacts, distrust has led to deception. Hiding family members who had been exposed to those sick with Ebola or others that have died has been common. Many local people who are suspicious of government and foreign health care workers have sought out traditional healers. Moreover, the local customs involving funeral practices make this Ebola outbreak especially dangerous, as the rural people do not believe or understand that they need to change their standard rituals of close contact with the bodies of deceased loved ones. In Guinea, 60% of new Ebola cases have been linked to traditional burial rituals. In this uneducated population, rumors and superstitions abound and often interfere with care of the exposed or ill. Even with all that has happened, handling or eating bats or chimpanzee meat continues. But it's not just a lack of education that is driving this outbreak. Even in countries with good education and health care, fear and panic often lead to poor decision-making.

WHAT IS THE FUTURE OF THIS EBOLA EPIDEMIC?

Almost certainly, at some point in the future, the government leaders, educators and health care workers will finally gain control and contain this outbreak. It will become a topic of discussion and reflection, like past infectious crises like HIV, Swine Flu and H1N1. But until enough resources are invested to stop this nightmare, Ebola will remain in the news as thousands of men, women and children continue to die the most horrible of deaths. S

IS EBOLA AIRBORNE?

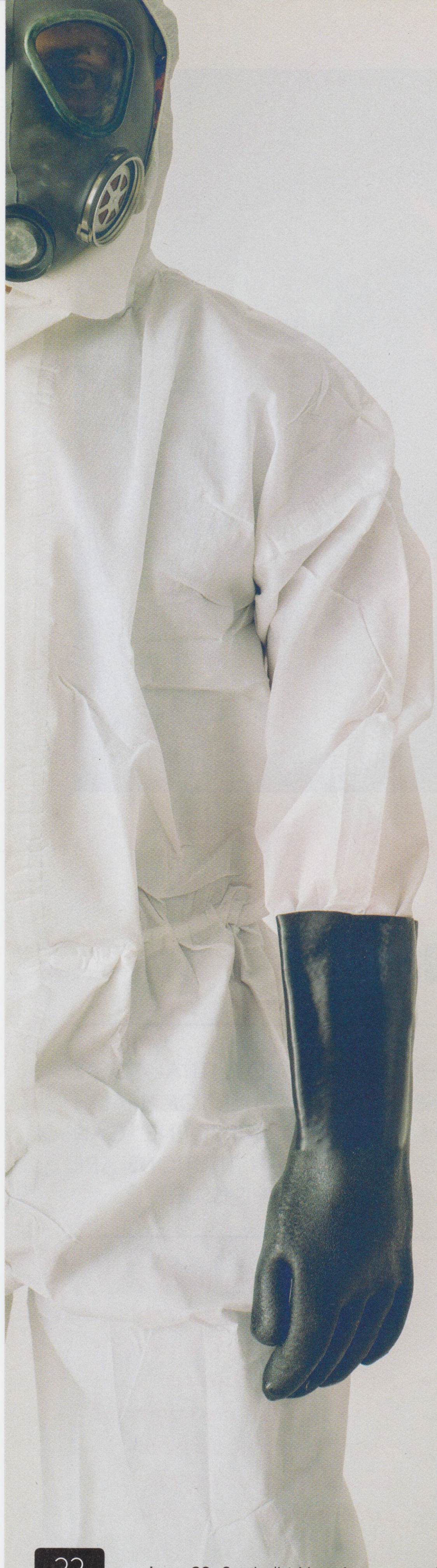
JOE ALTON, M.D., AKA DR. BONES

ONE OF THE QUESTIONS I AM ASKED MOST OFTEN ABOUT EBOLA IS ITS POTENTIAL TO BE TRANSMITTABLE THROUGH THE AIR. CDC DIRECTOR, DR. TOM FRIEDEN, AND OTHER TOP HEALTH OFFICIALS SAY NO, YOU CAN'T CATCH IT THAT WAY. DESPITE THIS, THE WORD "AIRBORNE" CAN BE DEFINED IN A LOT OF WAYS. NOW, TWO WELL-KNOWN AND RESPECTED INSTITUTIONS ARE DECLARING THAT WE CAN'T BE AS SURE AS THE GOVERNMENT IS ABOUT THIS ISSUE.

The Center for Infectious Disease Research and Policy (CIDRAP) at the University of Minnesota recently notified the CDC and the World Health Organization that "there is scientific and epidemiologic evidence that Ebola virus has the potential to be transmitted via infectious aerosol particles." For the first time, 'exhaled breath' is included in their report.

CIDRAP has been involved in public health preparedness for epidemics since 2001. With regards to Ebola, they have always stated that it is unclear how the virus is transmitted, at least from an airborne standpoint. Their new stance is troubling and calls into question the opinions of just about every medical expert you've seen in media.

In addition, the equally well-respected U.S. Army Medical Research Institute for Infectious Diseases (USAMRIID) has confirmed their alignment with the CIDRAP regarding the airborne nature of Ebola.



In 2012, scientists from the National Centre for Foreign Animal Disease at the University of Manitoba, Canada documented transmission of Ebola from pigs to monkeys. First, they injected a number of piglets with the Zaire Ebola strain (the current epidemic strain in West Africa) of the Ebola virus. The piglets were then placed in a room with, but separate from, several monkeys.

After a week, the inoculated pigs showed evidence of Ebola. In pigs, Ebola generally causes fever and respiratory symptoms in these animals, but is not fatal. After 2 weeks of exposure but not contact, all the monkeys showed symptoms of Ebola, making this the first time the disease was proven to be passed between different species.

Could lab workers have passed the virus to the monkeys while cleaning cages or some other duty in the lab? Maybe, but my opinion is that it's more likely it was passed through the air.

I've always felt that the issue of airborne transmission was more a question of semantics than anything else. Ebola is well known to be transmittable by inhalation. Droplets of blood, vomit, mucus, saliva, and other fluids spewed into the air by a patient definitely contain viral particles. When inhaled by others or otherwise transferred into eyes, nose, mouth, or open sores, the virus can certainly be transmitted. Therefore, Ebola can be caught through the air. The question is: Can you contract Ebola simply by breathing the air in a room or airplane cabin in which an Ebola patient is present?

The answer is still "probably not likely." Although the CIDRAP and USAMRIID reports have altered this answer ever so slightly to "probably not likely, but possible," it's still much more likely to be spread through direct handling of bodily fluids, such as blood, vomit, or bodily waste. This is why Ebola has been particularly harsh to health workers who must have contact with these fluids on a daily basis. Over 500 have become infected, with more than half succumbing to the disease so far.

The CIDRAP calls into question whether N95 respirator masks are effective in preventing inhalation of airborne Ebola virus. N95 masks are non-oil resistant respirators that serve as a barrier to at least 95% of particles that are over 5 microns in size. Indeed, the Ebola virus is only 2 microns in size, although most aerosol droplets capable of containing it would be larger than that.

The CIDRAP states: "Healthcare workers have experienced very high rates of morbidity and mortality in the past and current Ebola virus outbreaks. A facemask or surgical mask offers no or very minimal protection from infectious aerosol particles." They recommend instead a "powered air-purifying respirator (PAPR) with a hood or helmet."

To the average person, this presents a dilemma. The PAPR hood/helmet costs about $1000, well outside the range of most people's budgets. Therefore, will only health workers in the highest level facilities be truly safe?

This may explain the high level of infection and deaths among West African healthcare workers. I've seen many images of healthcare workers in West Africa, and they commonly show poor fits on masks. Sometimes, I even see N95 masks placed upside down, something I call "WE" syndrome, which is 3M (the most common name brand) read upside-down.

A mask that passes the "seal check test" should generally provide protection, unless you are physically caring for advanced Ebola cases. To seal check a N95, put the mask on and secure it snugly around the bridge of your nose. Then, with one hand on each side, breathe in deeply with your open mouth and then exhale forcefully. If the seal is good, the mask should indent slightly when you inhale and puff out when you exhale.

It's unlikely that proper techniques for donning and doffing personal protective gear are followed to the letter 100% of the time in West Africa. In fact, the CDC itself is constantly changing the guidelines for this procedure. Its early efforts were faulty and caused the infection of two nurses taking care of Thomas Eric Duncan, the Liberian national that became the first Ebola case diagnosed in the U.S. Once burned is twice shy, and now the safest gear recommended by the government is financially unaffordable to the average U.S. citizen, and more than a West African makes in a year.

The answer may simply be providing better training for health workers on proper fit for masks and spending more resources on acquiring the appropriate gear for those in close contact with Ebola patients. Even in the U.S., National Nurses United says that most nurses receive limited, if any, education on how to deal with pandemic disease.

What does this mean for the average U.S. citizen with limited financial resources? Wear two N95 masks at a time? N100 masks (blocks 99.7% of particles), which cost 15 times more? I don't know if this would be effective. In a community-wide outbreak, however, it would be impossible to outfit the entire population with powered air-purifying hoods (PAPR). One good thing: The report states that N95 masks would still be acceptable for early stage disease, which might allow for protecting those who are transporting the patient to a high-risk medical facility. For West Africa, the news is more grim: Ebola will become a constant presence, eventually leading to economic ruin and total chaos.

For those who believe travel restrictions from West Africa are cruel and unusual punishment, I say that an ounce of prevention is worth a pound of cure. I'm not alone in this opinion: Canada, Australia, and more than twenty African nations agree. Even major air carriers, like British Airways and Air France, have halted flights to the epidemic hot zone.

All Ebola patients should be transferred to high-level infectious disease centers in the U.S. There are only 4 units dedicated to high-level biosafety containment in the country: the NIH in Maryland, the CDC in Atlanta, the University of Nebraska, and St. Patrick Hospital in Missoula, Montana. Other hospitals are now being outfitted and designated for acceptance of Ebola patients; most of them are in New York City.

A travel ban from West Africa, in no way, prevents us from sending medical aid to those countries. We must step up humanitarian aid while taking serious steps to protect the health of the general public in the U.S. Although they seem logical, travel restrictions to the U.S. won't happen; political correctness has trumped public safety.

Speaking of travel, what should be your strategy when you travel on mass transit or on airplanes? If it is possible to contract Ebola by airborne means, crowded enclosed areas will have the highest viral "load." In this circumstance, it's wise to carry some sanitizing wipes in order to clean armrests, headrests, and especially bathroom door handles and fixtures.

Another thing you might also see in public, if we ever see a community-wide Ebola outbreak here: people wearing masks and gloves on the street. You might consider this outlandish, but it's standard procedure in many Asian countries and is actually considered a sign of social responsibility when you're sick and out and about. If we ever see a spike in Ebola cases in the United States, it might be wise to do the same.

Joe Alton, M.D. is a physician and author of the NY Times Bestseller, "The Ebola Survival Handbook," and the Amazon Bestseller in Survival Skills and Safety/First Aid, "The Survival Medicine Handbook." His website at www.doomandbloom.net offers 600 articles on medical preparedness for any disaster.

HOW TO PREPARE FOR A PANDEMIC

DANGER
INFECTION HAZARD
QUARANTINE AREA
AVOID CONTACT
BE ORGANIZED
BE PREPARED
BE SAFE
CLASS B ZONE
WHAT NOW?

Mike Adams, the Health Ranger

"...IT IS JUST A MATTER OF TIME BEFORE [A BIOTERROR VIRAL PANDEMIC] IS UNLEASHED ON A HUMAN POPULATION." - VIROLOGIST NATHAN WOLFE

As the world's top virologists have repeatedly warned, a global viral pandemic that sweeps across large cities is inevitable. Whether that virus is Ebola, an Ebola variant or something we haven't yet seen is largely irrelevant. The point to take away from this is it's important to prepare against the inevitable.

SOURCES:
[1] http://hosted.ap.org/dynamic/stories/U/US_EBOLA_US_HEALTH_CARE_PREPAREDNESS?SITE=AP&SECTION=HOME&TEMPLATE=DEFAULT&CTIME=2014-10-29-12-25-52
[2] http://www.naturalnews.com/047467_hazmat_suits_Ebola_Lakeland_Industries.html
[3] http://www.naturalnews.com/files/SITRep-148-Oct-10th-2014.pdf

SURVIVING THE EBOLA PANDEMIC

As you study this, keep in mind that Ebola is a level-4 biohazard virus with no known treatments or cures. The fatality rate currently ranges from 50% - 70% depending on which health authority you believe. Because there are no treatments or cures, every person who has survived Ebola has done so due simply to the quality of their immune system.

The following two-part strategy is necessary when preparing for an Ebola outbreak:

Part One: Surviving an Ebola virus infection (or preventing it in the first place).

Part Two: Surviving the collapse of social order which often follows a pandemic.

The human immune system, in other words, is the only proven defense against Ebola. A strong one will halt the disease and save your life. The importance of boosting immune function, while simultaneously taking steps to avoid immune suppression during a pandemic, cannot be stressed enough. What boosts immune function? While none of these things have yet been tested against Ebola, simple nutrients like vitamin D and vitamin C are proven immune boosters, with a long history of supporting healthy immune function and preventing colds, flus and even cancer. The world of natural medicine also provides an abundance of plant-synthesized molecules with documented anti-viral properties. Some of the many plants offering such properties include ginger, garlic, oregano, basil, peppermint, rosemary and even cinnamon. Black elderberry extract is commonly known to fight influenza viral infections, and minerals like zinc play a key role in preventing airborne flu infections.

Traditional Chinese medicine formulas such as the “blood heat” formula (known as “Xi Jiao Di Huang Tang” in Mandarin) have been used to fight viral pandemics for literally thousands of years. Due to their applicable therapeutic properties, some of the ingredients used in Chinese medicine should be investigated for their potential to prevent and possibly even treat Ebola; these ingredients include Sheng Di Huang, Xi Jiao, Chi Shao, Mu Dan Pi, Shui Niu Jiao, Xuan Shen, Da Qing Ye and Zi Cao.

INFIDEL COMBAT
SYSTEMS

CIVILIANS GRABBING UP BODY ARMOR

Will you miss your opportunity to own body armor before it’s outlawed?

U.S. Rep., Mike Honda, of Silicon Valley (D) announced he has submitted legislation to Congress to outlaw the possession of military-grade body armor by civilians.

It’s happening again. Five years ago fears that Obama would outlaw assault rifles led to the biggest buying spree Americans have ever seen.

Now, the federal government is considering banning the sale of military- grade body armor to civilians. Rep. Honda hopes the regulation will prevent criminals from using armor in battles with the police.

In the face of this still-pending regulation, people who don’t want to be caught flat-footed are rushing out to purchase body armor while they still can.

Infidel Body Armor CEO and military veteran, Chad Cooper, says sales are strong due to their discrete shipping policy and low pricing, “We offer 100 percent unconditional guarantee on all our products; and armored vests start at just $374.99, and includes shipping to all 50 states - including California.”

“I hope I never have to use this gear, but I’m glad I have it - just in case,” says a satisfied customer. Level III and IV armor are designed to stop rifle bullets as well as pistol rounds.

With an apparent impending economic collapse, illegal immigration surge, and social unrest, the smart choice is to armor up while we still can.

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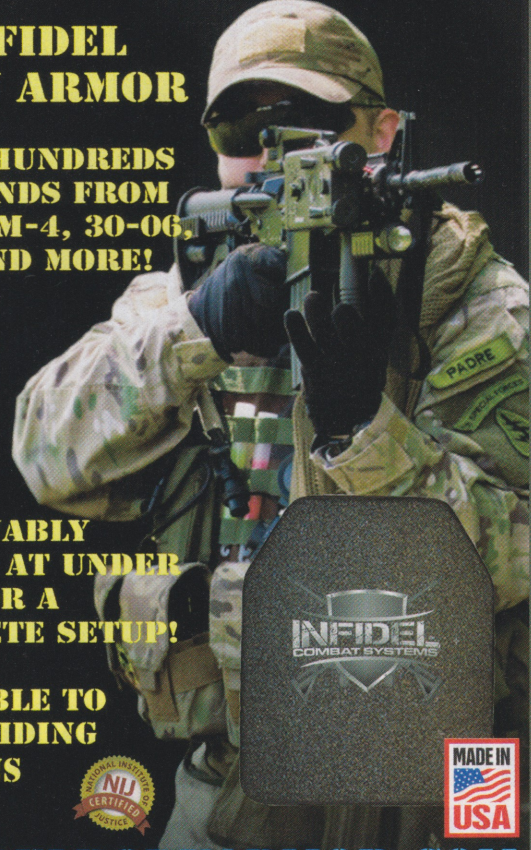

When it comes to experimental medicine, many people believe colloidal silver might combat Ebola, although there is currently no scientific proof that confirms this theory. The FDA aggressively attacks anyone selling silver who makes such claims and has issued threats of criminal arrest to at least three companies so far. As an investigative journalist, I have heard rumors of lives being saved in West Africa through the injection of colloidal silver IV solution, but I could not confirm the rumors nor could I recommend such an intervention until actual clinical trials are conducted.

Silver, however, is widely acknowledged as a very potent antibacterial substance for topical use, and for this reason alone, I strongly recommend all preppers acquire a reasonable supply of colloidal silver. Bandages soaked in it are fantastic at preventing skin infections, and silver-impregnated wound dressings are almost miraculous in their ability to prevent infections in burn victims (Medical-grade Manuka honey is also very useful in the same way).

Stop suppressing your immune system

When your immune system is suppressed, your ability to fight a virus like Ebola is impaired. Despite this, most people routinely suppress their immune systems through a toxic combination of junk food, medications and poor lifestyle habits.

Very few people realize this, but many common pharmaceuticals strip the body of essential immune-boosting nutrients. A book called "Drug Muggers" describes this phenomenon in more detail, explaining which drugs strip your body of which nutrients (such as vitamins C and D, zinc, selenium, magnesium, etc.). The more medications you take, the more likely you are immune suppressed.

Likewise, common behavioral patterns -- such as a sedentary lifestyle, lack of sufficient sleep, emotional stress and eating junk food -- also contribute to immune suppression. When immune systems are suppressed, they become immobilized and unable to meet the challenge of a virus replicating in the body's cells. Improving your lifestyle decisions to support healthy immune function is a simple and smart way to potentially save your own life during a viral outbreak.

Reducing your exposure to toxic synthetic chemicals is also key to protecting your natural immune function. Check the labels on your favorite store-bought foods: do they contain chemicals you can't pronounce? Most processed foods are laced with toxic preservatives, artificial colors, taste-enhancing chemicals and even cancer-causing chemicals, like sodium nitrate, which is used to color processed meats like jerky, bacon, sausage, ham, pepperoni, hot dogs and sandwich meats. The more synthetic chemicals in your diet, the more you suppress your immune function.

Immune function is also compromised by the chemicals in your home environment. Do you spray your lawn with toxic pesticide chemicals to kill the weeds? Some of those chemicals are absorbed through your skin. Does your home contain particle board furniture? If so, it's probably off-gassing formaldehyde and glues, filling your home's air with chemicals, which you then inhale and absorb.

But the real insult to your immune system comes from all the toxic personal care products in your bathroom and laundry room. Most "average" Americans expose themselves to over 200 synthetic chemicals every single day merely from using personal care products such as antibacterial soaps, shampoos, deodorants, perfumes, body lotions, cosmetics, sunscreens, shaving products, mouthwashes and laundry detergents. If you haven't yet cleaned out your bathroom and replaced all those toxic products with truly natural alternatives, you're literally poisoning yourself on a daily basis.

What are those natural alternatives? For most cleaning needs, Dr. Bronner Magic Soap is a simple, healthful solution. For laundry detergent, I like fragrance-free ECOS brand detergent. For shampoos, cosmetics and body lotions, seek out truly organic brands and make sure you read labels to avoid any crazy chemicals. By doing this, you'll not only be better prepared against any challenge to your immune system, you will also significantly reduce your risk of cancer.
Finally, living in any city is somewhat immuno-suppressive all by itself. Cities have higher air pollution and higher exposure to electro-pollution through EMF (Electromagnetic Fields), radio, wi-fi, high-voltage power lines and other sources. Many people aren't sensitive to these at all, but some are. And for those who are strongly sensitive to these electromagnetic fields, merely living in a city can be a toxic experience. Some people have found great relief by moving into the countryside where electro-pollution is virtually non-existent (and the air is cleaner, too).

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Surviving the chaos and panic

Surviving the biological threat of Ebola is only half the battle. If the outbreak has become so widespread that it's infiltrated your town, you'll also need to survive the social chaos, panic and desperation that's sure to follow.

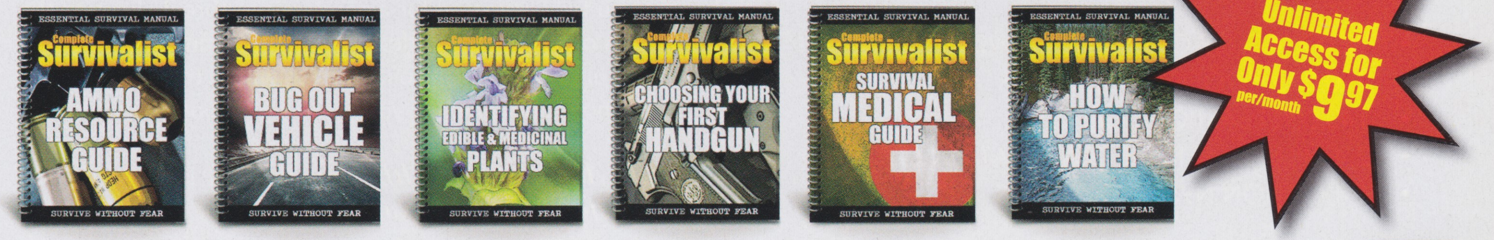
In the event of a viral outbreak, hospitals will be almost immediately overwhelmed, and many doctors and nurses will go on strike, quit their jobs or call in sick to avoid exposing themselves to potentially deadly pathogens. Mandatory government quarantines may require entire neighborhoods or communities to self-quarantine in their own homes for as long as 42 days, which is the true incubation period of Ebola as described by the World Health Organization.

This means preparing to survive 42 days with no outside resources is crucial to any pandemic survival plan.

Do you have sufficient quantities of food, water, emergency medicine, batteries, self defense items, cooking fuel, heating fuel and other supplies to hunker down and live in your own home for 42 days with no outside help? If not, you're not ready for a viral outbreak.

When a viral pandemic occurs, false hope in the medical system may get you killed. An Associated Press investigation recently found that "even small clusters of [Ebola] cases could overwhelm parts of the system." We've already seen that America's first few cases of Ebola caused treatment hospitals to be almost entirely shut down and start turning away other patients.

Because hospitals will be paralyzed by even a tiny number of Ebola patients, anyone who wishes to survive a pandemic needs to know how to prevent and treat Ebola infections at home. Do you know the principles of viral isolation? Have you set aside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plastic sheeting, shower curtains and enough tape to turn a room in your home into a makeshift isolation room? Do you have a full-face respirator, latex gloves, isolation gowns, shoe covers and plenty of bleach to make an Ebola-killing scrub solution?

If not, you're nowhere near ready for a viral pandemic.

Preparing for emergency medical isolation in your own home Remember that one of the most common scenarios you might encounter is the need to care for an infected family member at home. How exactly do you provide supportive care for that person without infecting yourself or other family members?

To be able to handle a situation like this, you will need to:

Acquire and store the basic medical isolation equipment, including: full-face respirators, latex gloves, Tyvek body suits, isolation gowns and hair nets. My recommended brand for face respirators is MSA Safety Works. Tyvek body suits can be readily purchased online for around $6 each.

Acquire isolation materials needed to construct or reinforce an isolation room, including: plastic sheeting, shower curtains and heavy duty tape, such as Gorilla Tape. You'll also need lighter duty packing tape to use for taping the sleeves of your body suit to your gloves or for sealing all zippers and other potential openings.

Learn and practice how to decontaminate yourself after interacting with an Ebola carrier. While wearing your protective gear, scrub down with a bleach and water solution, then carefully remove your gear, knowing that the gear, itself, may be contaminated with Ebola and could contaminate you if you handle it incorrectly. All your gear must then be thoroughly washed in a bleach solution and preferably dried in the sun (because sunlight kills Ebola). To wash your gear, one of the most useful pieces of equipment is a backpack sprayer.

For more details on how to build an emergency Ebola isolation room, see Episode 15 at BioDefense.com

In planning your own preparations, it is instructive to review the medical supplies requested by the nation of Liberia as the Ebola outbreak exploded there over the past few months. An official document, dated October 10th, 2014, urgently requested the following equipment for the "front lines" of Ebola: [3]

- 98,000 KG OF CHLORINE POWDER
- 990,000 HOODED BODY SUITS
- 140,000 PLASTIC BUCKETS
- 2.4 MILLION SETS OF EXAMINATION GLOVES
- 1.4 MILLION N95 FACE MASKS
- OVER 500,000 GOGGLES
- 590,000 SETS OF HEAVY DUTY PLASTIC GLOVES
- 174,000 RUBBER BOOTS
- 210,000 HAND SPRAYERS
- 4,800 BACKPACK SPRAYERS
- 3,200 MATTRESSES

This list of supplies gives you a realistic indication of what you might need in an Ebola outbreak, too.

Government stockpiling Ebola medical supplies like mad

Over the last few months, the U.S. government has ordered hundreds of thousands of Ebola hazmat suits and body bags. Lakeland Industries, makers of PPE gear (Personal Protection Equipment), recently announced they had received orders for one million hazmat suits for use against Ebola. [2]

The same government that insists Ebola is no threat to the American public is stockpiling enormous quantities of Ebola hazmat suits and body bags at a frantic pace. The government's actions contradict its public assurances, leading intelligent people to wonder just how much the government isn't telling us.

Remember, the United States government is the most extreme prepper of all, having built underground bunkers and cave complexes stocked with food, medicine, guns and ammo, communications gear, water supplies and all sorts of other gear. The government is prepared to survive a nuclear attack, a biological terrorism event, a pandemic outbreak, a meteor strike, a solar flare and even an EMP attack that brings down the power grid. This is the same government that accuses anyone who stores more than three days of food of being an "extremist." Yet the government itself has the most extreme preparedness plans of all.

In my view, preparedness is not extremism. Those who fail to prepare are the real kooks. Preparing for survival is an honorable and necessary activity, practiced by our ancestors and hard-wired into our behavioral genes. Those of us who prepare now for potential threats truly represent the future of the human race, because we'll be the only ones left standing after the next great crisis. Those who fail to prepare, on the other hand, will inadvertently remove themselves from the gene pool forever. But not before unleashing panic and chaos across society, because they failed to prepare.

Only when you are prepared to survive that panic and chaos are you fully prepared for a pandemic outbreak. Beating the virus is only half the battle. Surviving the panic drummed up by the unprepared delusional masses will be the more difficult part. I hope and pray that you get ready for both.

Mike Adams, the Health Ranger, is the creator of BioDefense.com and NaturalNews.com

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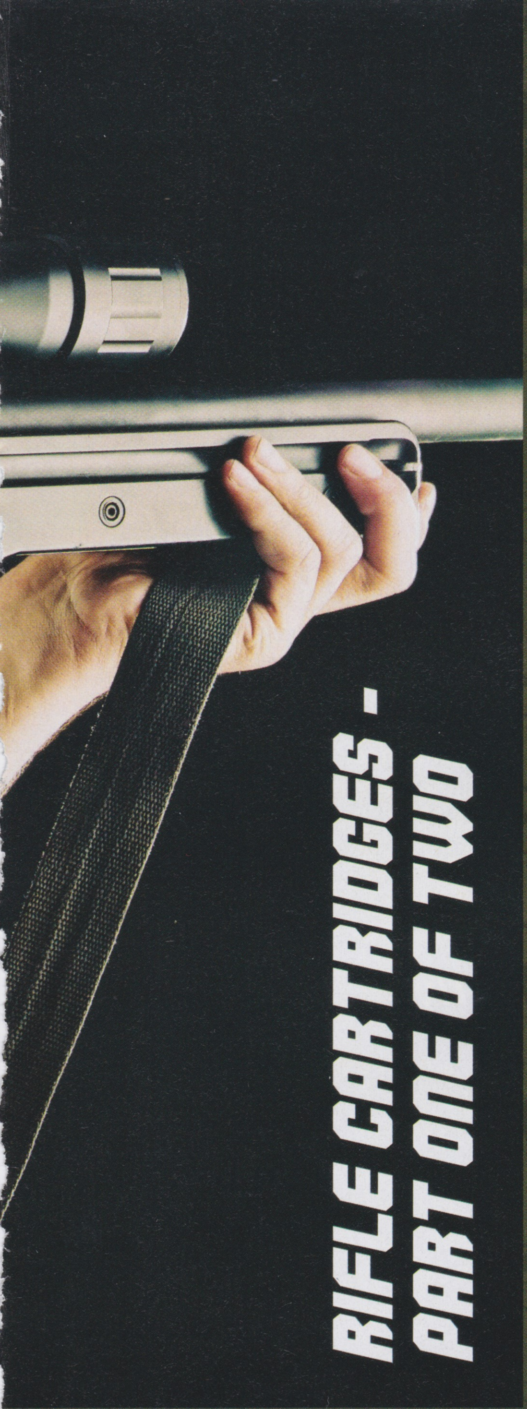
CARTRIDGES FOR SURVIVAL

DOUGLAS BELL

What cartridges are essential to survival? Well, that's an interesting question and one that deserves more than the usual rundown of "my favorite cartridges" offered by most books and magazine articles on the subject. Sure, the articles are interesting to read, and the recommended cartridges may well be the 'best,' but the best for what? The .22 Waldog (named for Waldo G.) is identified by some as the 'best' heavy benchrest rifle cartridge out there. It offers the same velocity range as the .223 Remington/5.56 NATO, but being made from the .220 Russian case run through a shortened .22-250 Remington die, would probably limit the appeal to the average survivalist/prepper. While .223 Remington (5.56 NATO) brass is basically available everywhere and loaded by every company that makes ammunition worldwide, boxer primed .220 Russian brass and ammunition isn't exactly a household name, nor is itfound just anywhere. So while the .22 Waldog may currently be the best benchrest cartridge in the biz, it certainly isn't the best survivalist cartridge, if you're looking for something common and/or cheap, such as the .223 Remington.

So, instead of identifying the very best products available, let's talk about those that are the most practical and applicable to the average survivalist. In Part I of this two-part series, we'll look at the most essential rifle cartridges for survival, while Part Two will focus on handgun cartridges.



RIFLE CARTRIDGES - PART ONE OF TWO

To start, let's restate and reanalyze the question: what are the 'best' cartridges for survival? To even begin answering that question, we need to define what we are talking about. Which product specs make a cartridge the 'best'? Is the 'best' the most common? The fastest? The most powerful? The cheapest? Well, depending on what you intend to use it for, any or all of these specs may influence what you'd consider the 'best' quality cartridge. Since we were talking about regarding the .223 Remington/5.56 NATO (yes, there are slight differences, but for our purposes, we will consider them one and the same) as the 'best' centerfire cartridge out there, let's examine it more closely.

Remington launched the .223 Remington as a commercial cartridge after the U.S. military adopted the .5.56 NATO in 1964. Being a military cartridge, it was instantly popular with civilian shooters, as they were assured of a steady supply of cheap, surplus ammunition and brass, not to mention the fact that whole generations of young men and women were trained with it by the military. So we have lightweight ammunition (meaning you can carry lots of it with you), as well as cheap surplus ammunition and boatloads of brass, the brass being incredibly easy to find and dirt cheap to buy too. So, it's cheap, it's common, it's accessible. This must mean it's the 'best' cartridge for survival, right?

No…not exactly.

Let's say you are out camping in the woods and hear a noise. Moments later a bear sticks its head in your tent (not as far fetched as you may think). Which would you prefer to have with you – a .223 rifle or a .458 Winchester Magnum rifle? If your .223 rifle is loaded with varmint bullets, chances are good the bullet won't even penetrate the skin, much less hit anything vital. Loaded with full metal jacketed (FMJ) ammunition, the bullet might punch through to the heart, lungs or spine if you're lucky, but while the .22 caliber bullets are good killers, they aren't good stoppers, as the FMJ bullets will potentially only put .22 caliber holes in the animal which might not disrupt enough to stop the animal in its tracks. 'Not a good stopper' means that, while the bear may die a week or two later from its wounds, you'll have been turned into bear scat (droppings) long before your "victory."

Now, if you really want to talk common and cheap, the .22 Long Rifle (LR) cartridge is the all-time leader in the U.S., as well as internationally. OK, as a rimfire, it can't be reloaded (it can, but for all intents and purposes, it is not considered reloadable), but since billions of rounds are loaded in the U.S. annually, not to mention in every applicable country in the world, it easily beats everything else out there in the areas of common access, affordability, and weight (at least it did at one time, just not lately). So the .22 Long Rifle (LR) cartridge is the ideal survival cartridge, right?

No…not exactly.

You see, while it is common, cheap and lightweight, there are problems. First off, as I mentioned, it is a rimfire, which means that it's less reliable than a centerfire, especially when it comes to the cheaper brands of the bulk packages. The rims may rupture when fired if they're too soft (one brand of .22s is notorious for misfires and blown rims, and the problem is even worse in their lower cost versions). And although all kinds of .22 RF cartridges, along with the 40 grain lead bullet (the regular bullet, the hollow points are 38 grains), have probably killed more people, outside of war, then the next three cartridges combined, that still doesn't make it a good stopper. Consequently, depending on what your purpose is, the .22 Long Rifle cartridge may or may not be the 'best' either, regardless of the fact that it has been used to kill everything that walks the earth, including big bears and elephants (not suggesting you should use it for hunting these particular game).

Another question you may have is whether or not a bigger bore cartridge is 'better'? Well... probably. In the U.S. the next most common bore size is .30 caliber (.308"). This covers everything from the .30 Luger to the various .300 magnums. In the military, this would go from the .30-40 Krag (the .30 Gov't of 1892, and the first cartridge loaded with smokeless ammunition in the U.S.), the .30-03 (the 'new' .30 Gov't of 1903 for the then new '03 Springfield rifle), the .30-06 (the .30-03 with the neck shortened slightly and adopted in 1906), the .30 M1 Carbine of WWII fame and the 7.62x51 NATO (.308 Winchester). Of these, the .30-03 is dead, as no one has loaded it in over 110 years, and the .30-40 Krag is hanging on by a thread, as the U.S. government sold large numbers of Krag rifles as surplus over the years, so lots of them are still out there. The .30-06 is extremely popular and has been for over 100 years, although the .308 Winchester (7.62 NATO) has been cutting into that popularity for the last 50 years. Still, there are no signs the .30-06 has anything to worry about just yet. The .30 M1 Carbine cartridge is still highly popular for no good reason, apart from the light, handy carbines it was chambered for, which are making a comeback and being manufactured again. Basically, the .30 M1 Carbine cartridge is a pistol caliber cartridge that was never intended for front-line combat, but was made to be used in a light, handy carbine for troops who needed to be armed but didn't need a full-sized rifle. With neither the original (now highly collectible) carbines, the newly manufactured carbines (more for nostalgia then anything else) nor ammunition being cheap, and with no surplus ammunition being available for years, the .30 M1 Carbine doesn't make the cut. This leaves the .30-06 and .308 Winchester/7.62x51 NATO as the clear winners.

Deciding between the .30-06 and .308 Winchester seems to be a no brainer, right? The .30-06 has an easy 200 fps (feet per second) advantage over the .308, with all bullet weights up to 200 grains and is considerably more powerful with 200 and 220 grain bullets, so it must be the 'best'?

Well…not exactly.

You see, very little military surplus ammunition is available for the .30-06 anymore, and what is available does not come cheap, as it's probably going on 50 to 60 years old now, having been replaced by the U.S. military with the 7.62x51 (.308 Winchester) in 1957. Since the U.S. government was supplying military aid – meaning guns and ammunition – to our "allies" worldwide, the 7.62x51 replaced the .30-06 as a military cartridge in most of the (so-called) "free" world. Also, suitable military grade firearms for the .30-06, such as the FN 1949, '03 Springfield, P-17 Enfield, and M1 (Garand) Rifle, are all going to be 50 to 60 years old at best, and the M1 Garand needs military spec ammunition to work properly and will bend the operating (op) rod if fed the wrong ammunition. Spare parts aren't as common or cheap as they once were, which makes all these guns highly collectible.

The 7.62x51 cartridge, being the next military cartridge, proved to be extremely popular. It's been adapted to every action that was capable of accommodating it, which included practically everything, from single shots to bolt actions, pumps, levers and automatics, which the cartridge was designed for to begin with. Also, while military surplus ammunition isn't as common or as cheap as it once was, it is still widely available. Even the very oldest 7.62x51 ammunition isn't going to be much older than half a century. Since the 7.62x51 cartridge was, as stated earlier, designed for automatics (self-loading rifles for the PC crowd), a number of excellent military and military-style rifles are chambered for it, such as the M1A1 (commercial copy of the M-14 rifle), FN-FAL, Ishapore SMLE A2 (bolt action), AR-10, Saiga (AK-47 copy) and others.

The other very popular, in this case commercial, .30 caliber rifle cartridge is the .30-30 Winchester. The .30-30 Winchester of 1895 was the first commercial cartridge loaded with smokeless powder in the U.S., while the .30-40 Krag of 1892 was the first military cartridge loaded with smokeless powder in the U.S. The .30-30 Winchester was first chambered in the 1894 Winchester lever action rifle in 1895, with the first chamberings being the 32-40 and 38-55 Winchester cartridges. As mentioned, the rifle became an instant hit. When you consider the Winchester 1894 lever action rifle has sold over six million copies, mostly in .30-30, not counting the various Marlin, Savage, Mossberg, Rossi and other .30-30 rifles and carbines, this is a very popular cartridge. So it's the best, right?

Well…not exactly.

While the .30-30 Winchester is actually a very accurate cartridge, the cartridge is limited by the rifles for which it is normally chambered; lever actions, plus a few pumps. A few bolt actions were also chambered for it, but since most people buying a .30-30 were looking for light, fast-handling and fast- firing rifles, the bolt actions never sold well. Plus, the .30-30 is normally considered a 150 to 200 yard cartridge due to the flat nosed bullets required in tube-fed lever actions and the iron sights that come with them.

The 7.62x39mm Russian actually uses .310"-.311" bullets and is a near .30-30 semi-automatic clone as far as velocity is concerned. Chambered for the AK-47 and SKS, it's about as common worldwide as it can get. So it's the best, right?

Well…not exactly.

While the cartridge is common and a good 150-200 yard round, cheap surplus ammunition is getting harder to find and is no longer as cheap as it once was. Plus the AK-47, while extremely reliable, is not overly accurate. That limits its use to about 150 yards. The AK is rather heavy as well, and many states or cities ban the larger 30 rd magazines.

If you want to talk popular .30 caliber magnums, the .300 Winchester Magnum is the "be-all, end-all." Sure, a dozen or so other .30 caliber magnums are in the running, but if you are talking popularity, this is it. Used by long-range target shooters, as well as the U.S. military for a sniper round, the .300 Winchester Magnum is immensely popular worldwide. If you can't do it with the .300 Win Mag, you need a bigger bore, not a different .30 caliber magnum. So it's the best right?

Well…not exactly.

You see, like nearly all large rifle cartridges and most magnum cartridges over .270 caliber (actually, that is .277", such as the .270 Weatherby Magnum), the .300 Win Mag – like all .30 caliber magnums – packs a punch at both ends. While the recoil is not excessive when compared to some other .30 caliber magnums, it isn't something most shooters are going to enjoy, and it takes some getting used to. The ammunition is also larger, heavier and more expensive than the .30-06 and .308, plus no cheap military surplus is available. It requires more powder and, since the case headspaces on the belt, chambers are often, what might be charitably called, generous. As a result, the number of times the case can be reloaded before the case fails is limited. Since, in a survival situation, you may not be able to amble on down to the store to buy more, case failure will probably be a problem for long-term survival...or it might not, since most .30 caliber mags are not going to be shot all that often.

All right, that should cover the most common and/or popular rifle cartridges, skipping over a few dozen others like the .22-250, .243 Winchester, .270 Winchester, 7mm Remington Magnum, and so on. So what about the best handgun cartridges for survival? Part Two of this series, available in the next issue of Survivalist magazine, will cover this topic and advise accordingly.

Book Review

Locusts on the Horizon

(Book review by Chris Savoury)
Authors: Plan B Alliance Project - Updated March, 2014

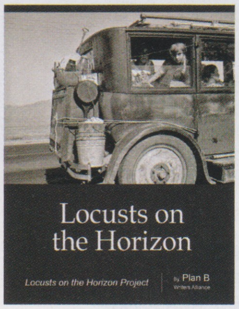
This is, without a doubt, the most comprehensive, exhaustively researched, and complete source of information for the self-reliant lifestyle. With 247,000 words, 1187 pages, illustrations, and hundreds of links to online content, you can't go wrong.

The authors – Plan B Alliance Project – are a group of men with varied backgrounds in military, law enforcement, technology, shooting sports, and even finance! With this broad authorship, the reader profits from multiple schools of discipline, rather than one person's point of view. Their second book, The Family Gun, was released in March 2014.

The historical events, personal experiences, and in-depth research in this book are relevant to present and, most likely, future events. The book offers chapters in food sourcing, reloading, transportation, martial law, EMP's, bartering, hunting, communications, shelter, gun reviews, and so much more – too much to fit into this article. If you prefer to read on-the-go or have an emergency copy with you for reference, the E-book version can be viewed on PC through the Kindle Cloud, smartphones and E-readers. Charging via a vehicle, solar, or even a hand-cranked device will keep you informed and entertained when the power is down.

The first time that I read Locusts on the Horizon, I breezed through 390 pages without stopping. Not only is the content informative, it's interesting. People from all walks of life agree that it's not a matter of if something happens, it's when. So, instead of walking around blind-folded, take a good hard look around and face the fact that we are living in some very challenging times. From natural disasters to political turmoil to viral outbreaks, there is no better time to prep.

Locusts on the Horizon is the most comprehensive, informative and compelling book I have read on the subject of preparedness. The authors did an outstanding job in presenting the facts that, with a little forethought, some basic prepwork, and a few adjustments to your accustomed lifestyle, anyone can learn from and weather what the future has in store. Locusts on the Horizon is THE go-to book on the prepping way of life. It's amazing how much you think you know, until you are shown otherwise. For the price alone, no one has a reason not to own a copy. It does not disappoint.



Something is on the horizon; it may not be locusts, but it'll probably be equally unpleasant. Prep on, Preppers...

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Building Your Prepper Medicine Cabinet

Ethan Huff

IF THERE'S ANYTHING IMPERATIVE IN LIGHT OF CURRENT WORLD EVENTS, IT'S THAT INDIVIDUALS WHO ARE COGNITIVELY AWARE OF HOW QUICKLY AND EASILY A SOCIETAL BREAKDOWN COULD OCCUR NEED TO BE ADEQUATELY PREPARED TO DEAL WITH A POTENTIAL SYSTEMIC CRISIS. STOCKPILING THE NECESSARY FOODS, MEDICINES AND OTHER NECESSITIES IS OF PRIMARY IMPORTANCE, AS THESE ARE THE MOST LIKELY TO DISAPPEAR FROM STORE SHELVES DURING WIDESPREAD PANIC.

Some of the most important "prepper" items to keep on hand include the following:

Essential Oils

The healing properties of essential oils are nearly limitless, and research is regularly confirming how these powerful extracts can be used to mitigate conditions like stress, digestive discomfort, emotional pain and even heart disease. Depending on the type of extract, essential oils can be used to treat everything from poor circulation and respiratory illness to bacterial and viral infections.

"Although there are many powerful essential oils some of the best include lemon, orange, cinnamon and clove," says Dr. David Jockers of Maximized Living. "The citrus essential oils have very unique properties that enhance microcirculation throughout the body. Cinnamon and clove are the most anti-oxidant dense essential oils. These oils can

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be diluted in water, used for aromatherapy or put on the skin surface to derive the benefits."[1]

For some helpful beginner tips on making and using essential oils, check out "A Beginner's Guide To Essential Oils" by Dr. Patricia Bratianu, R.N., Ph.D., R.H. (A.H.G.), at OffTheGridNews.com.[2]

Manuka Honey

For thousands of years, honey has been used for more than a tasty spread on bread. As a natural medicine, when applied topically, honey's antimicrobial properties can help protect and heal wounds. Internally, honey can also help prevent infection, making it essential to any prepper medicine cabinet.

Manuka honey, which is sometimes referred to as non-peroxide, medical-grade honey, is said to be even more potent than regular honey. In vitro (outside of a living organism), manuka honey has been shown to hinder the growth of harmful pathogens. It may also be effective at preventing infections from antibiotic-resistant bacteria like MRSA, which can be life-threatening.[3]

For more on how to use manuka honey and how to distinguish between impure manuka and the real thing, read "How to properly use manuka honey (and where to find it)" by Jonathon Benson at NaturalNews.com.[4]

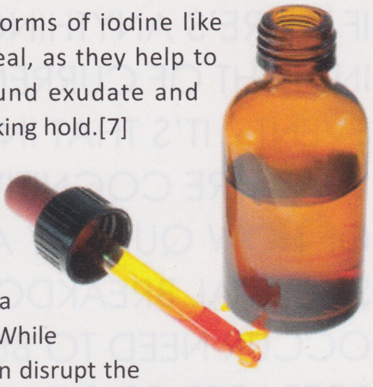
Colloidal Silver

One of the most powerful antibacterial and antiviral compounds known to man, silver is an effective analgesic that is easy to obtain and store, and won't cause harmful side effects. In the event that clean water is unavailable, silver can also be used to purify water without causing arterial damage like common chlorine.[5]

Topically, a high-quality colloidal silver compound is excellent for treating burns and wounds, and can even be used to treat sun-damaged skin. According to EMR Labs, there are some 650 known disease organisms that are killed by colloidal silver, including anthrax, impetigo, whooping cough, ringworm, and shingles.[6]

Iodine/Potassium Iodide

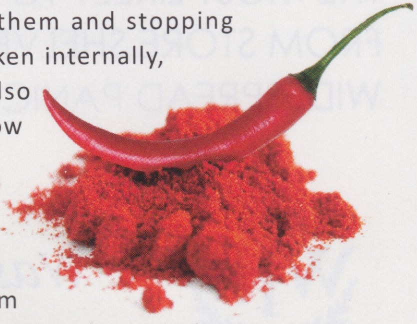
In the same vein, iodine is another versatile antibacterial agent that has long been used to treat wounds and prevent infection. Slow-release forms of iodine like cadexomer iodine are ideal, as they help to both absorb excess wound exudate and prevent infections from taking hold.[7]



Potassium iodide, a man-made form of iodine, is also beneficial, specifically in the event of a nuclear radiation release. While radioactive compounds can disrupt the normal production of thyroid hormones like thyroxine and triiodothyronine, potassium iodide helps block the thyroid gland's absorption of radiation, effectively protecting the body against radiation poisoning.[8]

Cayenne Powder

Believe it or not, the extract of this popular herb is a must-have for injuries which may produce hemorrhaging. Traditional herbalists have been known to pour the powder of cayenne pepper directly into fresh wounds, effectively sterilizing them and stopping the bleeding. When taken internally, cayenne pepper can also help increase blood flow and speed recovery from a heart attack.[9]



"Native Americans have used cayenne (Capsicum annuum or frutescens, or red pepper) as both food and medicine for at least 9,000 years," says the University of Maryland Medical Center. "Cayenne has also been used in traditional Indian Ayurvedic, Chinese, Japanese, and Korean medicines as an oral remedy for stomach problems, poor appetite, and circulatory problems. It has also been applied to the skin for arthritis and muscle pain."[10]

To learn more about the healing benefits of cayenne pepper, be sure to check out "17 Health Benefits of Cayenne Pepper" by the Global Healing Center.[11]

Sources for this article include:
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[2] http://www.offthegridnews.com
[3] http://www.ncbi.nlm.nih.gov
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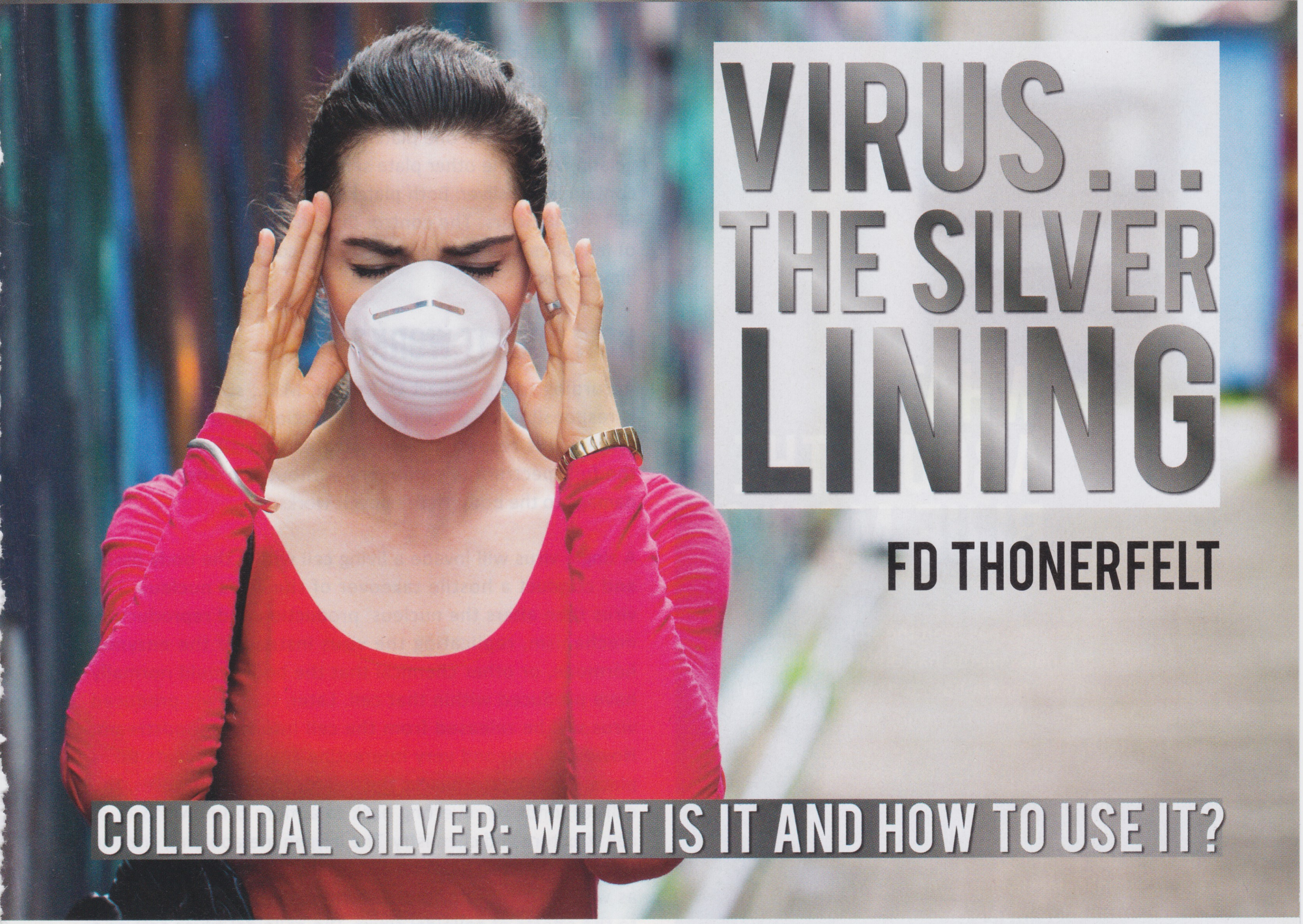
VIRUS... THE SILVER LINING

FD THONERFELT



COLLOIDAL SILVER: WHAT IS IT AND HOW TO USE IT?

WHAT IS A VIRUS, REALLY?

A virus is a small infectious agent that replicates only inside the living cells of other organisms. Can anything help fight it? For many years, extensive research into the therapeutic properties of silver has been conducted under the direction of Dr. Becker at the Upstate Medical Center, Syracuse University, in Syracuse, New York.

“What we have actually done is rediscover the fact that silver kills bacteria which has been known for centuries. When antibiotics were discovered, clinical uses for silver as an antibiotic were discarded,” concludes Dr. Robert O. Becker, M.D.

Becker’s research shows that silver combats a wide range of bacteria without resulting in any known side effects or damage to the body’s cells. However, silver does more than kill disease-causing organisms. It also causes major growth stimulation in injured tissue. Dr. Becker proposes that the presence of the silver ion may help to regenerate tissue and eliminate old or cancerous cells, as well as any other diseased or abnormal condition. An all-natural antibiotic alternative, colloidal silver disables the oxygen-metabolism enzyme of any virus, fungi, bacterium or other single-celled pathogen; this enzyme is its chemical lung, so to speak. The pathogen suffocates, dies, and is eradicated by the immune and lymphatic systems.

Since the dawn of time, silver has been used to help fight germs, bacteria, and other unfriendly microorganisms. It’s no coincidence that, for thousands of years, silver has been used in eating utensils, such as silverware, silver cups, silver serving trays, as well as in medicine. Early American settlers even put silver coins in milk to help keep it fresh without refrigeration. In the 1930’s, American physicians relied on silver as an antibiotic treatment. Today silver is used in bandages, in salves for burns, and to protect against infections. Silver is even used in a nitrate form, which is dropped into newborn eyes to help prevent infections.

To prove how silver had powerful germ-inhibiting capabilities, Alfred B. Searle (the founder of the pharmaceutical company) conducted a test in the 1930's, which he describes in his book, The Use of Colloids in Health and Disease. He used two plates filled with gelatin. Liquid silver was placed in one plate for about five minutes with the gelatin, while the other plate served as the control; it did not contain liquid silver. Both plates were then left at a constant 68° for 48 hours. The control plate had about 350 colonies of microbes, while the plate that was covered with silver had almost none.

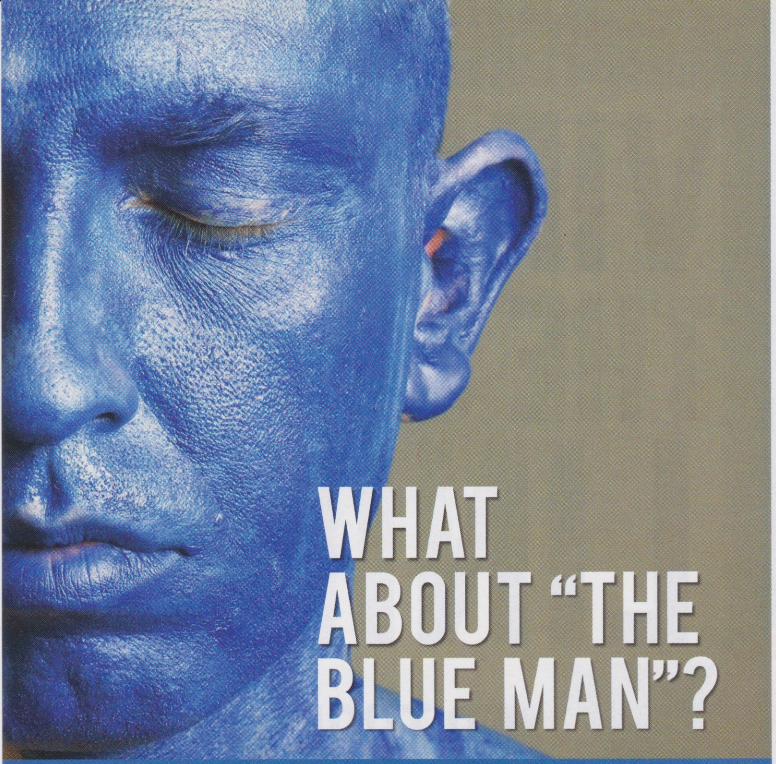
HOW DOES IT WORK?

According to Dr. Robert O. Becker, M.D., silver deficiency is responsible for the improper functioning of the immune system. His research demonstrates that silver works on the full spectrum of pathogens without any side effects or damage to the body. Here's how it works:

A single virus will invade a living cell within the body tissue and conduct a hostile takeover of the cell's nucleus. The virus then alters the nucleus' production and reproduction mechanism, replicating the virus instead of the enzyme, hormone, or other chemical that the body would normally have produced within that cell. Later, the newly produced virus will be released from the cell into the bloodstream. However, a second very interesting course of events takes place. As the virus hijacks the cell for its own purposes, the cell responds by reverting back to a more primitive form of cell structure and chemistry. The oxygen metabolizing enzyme – or the "chemical lung" residing in the cell wall – reverts back as well. This more primitive form of enzyme is vulnerable to the effects of colloidal silver. The colloidal silver acts as a catalyst, permanently disabling the enzyme simply by being in close proximity with it. The cell can no longer function, as it can't breathe. When no oxygen is allowed to enter the cell, the virus-producing cell dies by suffocation.

As previously mentioned, Dr. Becker has also found that silver does more than kill disease-causing organisms. Silver causes major growth stimulation of injured tissues. When treated with colloidal silver, burn patients and elderly patients experience quicker healing, and even cancer cells can revert back to normal cells. All strains of pathogens resistant to other antibiotic's are killed by silver. In an article, titled, "Our Mightiest Germ Fighter," the March 1978 issue of Science Digest reported: "Thanks to eye-opening research, silver is emerging as a wonder of modern medicine...An antibiotic kills perhaps a half-dozen different disease organisms, but silver kills some 650. Resistant strains fail to develop. Moreover, silver is virtually non-toxic."

The article ended with a quote by Dr. Harry Margraf, a biochemist and pioneering silver researcher who worked with the late Carl Moyer, M.D., chairman of Washington



WHAT ABOUT "THE BLUE MAN"?

By now nearly everyone has seen the story about Paul Karason who the news media has dubbed "The Blue Man". Although the media has continually said that he was taking colloidal silver, nothing could be further from the truth. The Blue Man story became a major media event of disinformation (as most major media events are), which was produced by a public relations firm and paid for by a pharmaceutical interest. The purpose of this campaign was to scare the public away from using colloidal silver products. The tactic was to claim that the Blue Man's condition was caused by his use of colloidal silver, thus implying that anyone who uses colloidal silver would suffer a similar fate. The entire story as presented is a study in blatant misrepresentation. The fact is that Paul contracted a condition called argyria that turns the skin a blue-gray color. He contracted this condition by taking his own homemade silver compound, which was mostly a highly concentrated ionic silver solution. When he prepared the solution, he believed he was making colloidal silver. He was wrong. To make the solution even more dangerous, he added salt to the brew and then used electrolysis to form a high concentration of silver chloride with large particles, which results in argyria. He further applied the compound to his skin, causing himself to become an internal and external photographic plate. To finish himself off, he used a tanning bed to "fix" the silver in his body. The Blue Man charade demonstrates once again that the mass media cannot be trusted to report anything that even remotely resembles an honest "news" story about colloidal silver. It's easy to see that ALL of the "news " today is propagated with an agenda.

University's Department of Surgery in the 1970's: "Silver is the best all-around germ fighter we have." Colloidal silver water and pure colloidal silver cream are our best natural defense against germs and viruses.

COLLOIDAL SILVER IS SAFE

This catalyst disables only those particular enzymes that all one-celled bacteria, fungi, and viruses use for their oxygen metabolism, which then suffocate. Yet, colloidal silver causes no harm to human enzymes or any part of the human body chemistry. It kills disease-causing organisms in six minutes or less, upon contact. Resistant strains fail to develop and the body develops no tolerance. Colloidal silver is both a remedy to and a prevention from infections of any kind. When you have a sufficient amount of colloidal silver in your body, you possess a superior second immune system. This second immune system was in common use until 1938.

Colloidal silver may be the most useable form of the most effective disease fighter there is. It's not a chemical compound containing silver, but pure metallic silver composed of a few atoms of sub-microscopic clusters, suspended in pure water by the tiny electric charge on each atom. It has no taste, does not upset digestion, nor does it sting. The body actually needs colloidal silver to fight disease-causing organisms and to aid healing. Older folks feel younger, because colloidal silver improves digestion, and their body's energy can be used for daily living rather than for fighting off disease. Silver also aids the growth and health of a developing fetus, and eases the delivery process and the recovery.

In short, colloidal silver water and pure colloidal silver cream are both necessary preparedness tools not only for post-collapse scenarios but for everyday life.

What if the Grid Goes Down?!

Did you ever hear the expression "They were born with a silver spoon in their mouth"? Well, I used to think it meant they were wealthy… but what it really meant was, they were healthy! Few of the wealthy people died from the bubonic plague, back in the 1400's. Why??? Perhaps it was the silver spoons and pacifiers they gave their children to suck on? Silverware and silver pacifiers became popular around this time and for the same reason. Silver pacifiers are still given to babies in many countries. In the United States, people have forgotten this heritage and use plastic pacifiers today. If people are wise, they will return to using silver because our babies are very susceptible to all kinds of bacteria, viruses and fungi.

Silver has been known for its health benefits since before the time of Julius Caesar. The Greeks lined water and wine urns with silver to kill bacteria. The Romans discovered that a poultice of silver helped heal burns, cuts and sores. The main reason why people started using "Silverware" was because they observed that food that touched silver was much less apt to spoil or make you ill.

American settlers knew the value of silver both as wealth and for their health. They would simply throw a silver coin in their water and milk supplies to kill germs and keep it fresh… if they needed the money, they could take it out and still use it.

In 1884, Dr. K. S. Crede, a German obstetrician, discovered that a mild silver solution of colloidal silver, put into a babies eyes at birth, dramatically reduced eye infection, which is common in babies. Shortly thereafter, laws were created in the United States, Canada, Norway and Denmark requiring all physicians and hospitals to put a silver solution in the eyes of every baby born in their care. It is still done today in most countries and, in all probability, you experienced it as a baby.

With all the travel that goes on today, germs do not have to wait on the wind to carry them to new and distant lands… they simply hitch-hike on airplanes, boats, and trains where the passengers are their unsuspecting hosts. (Did you ever wonder who has touched that hand rail before you? Or used your cabin on a Cruise Ship? Not to mention Hospitals or Doctors offices.) Vaccines will protect you from known flu bugs, but there is less protection if you are already infected. **Modern antibiotics only kill some bacteria and fungi not viruses, such as flu and common cold viruses.**

Colloidal silver has no recorded reaction with other medications - It is tasteless, odorless, harmless to eyes, helps improve digestion and does not upset the stomach. The body develops no dependency and you cannot overdose on it. **Colloidal Silver Water helps prevent colds, flu, and viruses while promoting greater energy, with NO side effects.**

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JONATHAN BENSON

HOW TO KILL A VIRUS

WITH EBOLA AT THE FOREFRONT OF THE WORLD'S COLLECTIVE MIND, DISEASE PREVENTION – AND PARTICULARLY HOW TO PREVENT VIRAL INFECTIONS – IS ON EVERY SURVIVALIST'S RADAR. INCIDENTALLY, THE ANNUAL RITE OF "FLU SEASON" IS ALSO UPON US. BUT LEARNING HOW BEST TO PREPARE FOR THE WORST POSES ITS OWN UNIQUE SET OF CHALLENGES BECAUSE, QUITE FRANKLY, REAL SOLUTIONS FOR DISEASE ERADICATION AREN'T EXACTLY POPULAR MEDIA'S THING.

Ultraviolet C light disinfects water, sterilizes surfaces

As defined by the World Health Organization, ultraviolet C light – or UVC (short wave) – is measured in wavelengths between 100 and 280 nanometers (nm). UVC light is one effective way to rid exposed surfaces of harmful pathogens. A growing number of hospitals, notorious for harboring antibiotic-resistant "superbug" pathogens, have chosen this non-toxic method as a first-line defense against pathogens. And you can, too.

The U.S. Army Corps of Engineers recognizes UV light as effective in the purification of water. UV light purifies by destroying harmful microbes, including yeast, bacteria, algae, molds, viruses and oocysts (cysts containing a zygote formed by parasites). Many water treatment facilities use UV light to control microorganisms, as it penetrates the cell walls and cytoplasmic membranes of organisms and rearranges their DNA, effectively preventing them from reproducing.[1]

UV robots at hospitals are already proving to be more effective than bleach at cleansing equipment and sterilizing rooms. Up to 25,000 times more powerful than natural sunlight, UV robots can be programmed to shine light on all exposed or potentially compromised surfaces, including under beds and between curtain folds. After about 10 minutes, anything living on surfaces will be rendered completely sterile.[2]

"We can clean and disinfect a room (by hand) to an 85% level, but when we use the ultraviolet light we can clean that room to 99.9%," Dr. Ray Casciari, a pulmonary disease specialist at St. Joseph Hospital, stated on CNN. "This is the future of hospitals because 85% is not enough."

Most mainstream news outlets are advising people to constantly wash their hands and avoid human contact, but such preventative measures are hardly foolproof, nor are they practical. Instead of recommending these wishy-washy tactics, the general population should be advised to become proactive in their health. Strengthening one's immune system is the first line of defense, and learning how to effectively prevent infection is the second. The latter approach is two-pronged, meaning there are safe and effective ways to kill viruses on surfaces as well as inside your body. Knowing the methods for both is critical when it comes to your long-term health.

Silver, copper solutions prove effective against harmful pathogens

The metals, silver and copper, are disease killers as well. The colloids of both metals exert an "oligodynamic effect" on microorganisms, effectively killing fungi, viruses, molds and various living cells, even at very low concentrations. Put simply, silver and copper colloids bind to the proteins of pathogens and basically deactivate them, resulting in their destruction.

Researchers from the National College of Kathmandu in Nepal described this process in a 2002 study, which examined how metal ions interact with microorganisms. They wrote:

"The exact mechanism of this action is still unknown but some data suggest that the metal ions denature protein of the target cells by binding to reactive groups resulting in their precipitation and inactivation. The high affinity of cellular proteins for the metallic ions results in the death of the cells due to cumulative effects of the ion within the cells."[3]

Boost your immune system with antiviral herbs

Though we'd all like our surfaces to be pathogen-free, worrying about the pathogenicity of everything you touch is really only necessary when your immune system is not up to par. If your immune system is strong and well-supported with proper nutrition, your chances of succumbing to illness are greatly reduced, which is why eating right is so important to survival.

If you wish to avoid viral infections, purposely supplementing your diet with antiviral foods and herbs is critical to your overall health. Here are some helpful supplements you may want to incorporate into your diet:

APPLE CIDER VINEGAR. For regular maintenance, add one or two tablespoons of apple cider vinegar along with a splash of fresh lemon in your water or juice every morning. Raw apple cider vinegar is rich in nutrients, including potassium, phosphorus, sodium (the healthy kind!), magnesium, sulfur, iron, copper, fluorine (not the synthetic type of fluoride added to water), silicon and pectin, as well as dozens of trace minerals and essential amino acids.

OIL OF OREGANO. Hailed for its amazing antiviral, antibacterial and antioxidant potency, oil of oregano belongs in every survivalist's health repertoire. Studies have shown that the carvacrol component of the oil is particularly beneficial in targeting and eliminating viruses.[5] And unlike pharmaceutical drugs, oil of oregano won't kill off your healthy intestinal flora, nor will it cause antibiotic resistance.[6]

ELDERBERRY. Sometimes referred to simply as "elder", elderberry has long been used as a treatment for respiratory ailments stemming from cold and flu. The University of Maryland Medical Center recognizes elderberry as having proven anti-inflammatory, antiviral, antioxidant and anticancer properties,[7] and laboratory evidence has shown that the "superfruit" is a powerful immune-booster.[8]

VITAMIN C. Perhaps best known for treating colds, vitamin C is arguably the most effective remedy for preventing and treating viruses of all kinds. The late Dr. Linus Pauling studied the nutrient extensively and found that, in order for the immune system to maintain its defenses against viral infections, vitamin C is essential. Injections of high-dose vitamin C are also effective at eradicating disease once it has taken hold.[9]

VITAMIN D. One of the easiest ways to maintain a vibrant immune system is to spend more time in the sun. When your skin is exposed to ultraviolet (UV) radiation from the sun, your body produces vitamin D, which in turn reduces your risk of developing influenza and other viral conditions. Another positive side effect of UV rays is that they serve your mental health by boosting serotonin levels, which contribute to happiness and feelings of well-being. So high levels of vitamin D from the sun not only maintain the body's serotonin and, thus, a person's happiness, but they also prevent that same person from getting sick in general.[10]

All of these are highly effective at alkalizing and detoxifying the body, making conditions unfriendly to pathogenic bacteria and viruses.[4]

Sources for this article include:
[1] http://glmris.anl.gov[PDF]
[2] http://www.cnn.com
[3] http://www.tested.com
[4] http://bragg.com
[5] http://www.ncbi.nlm.nih.gov
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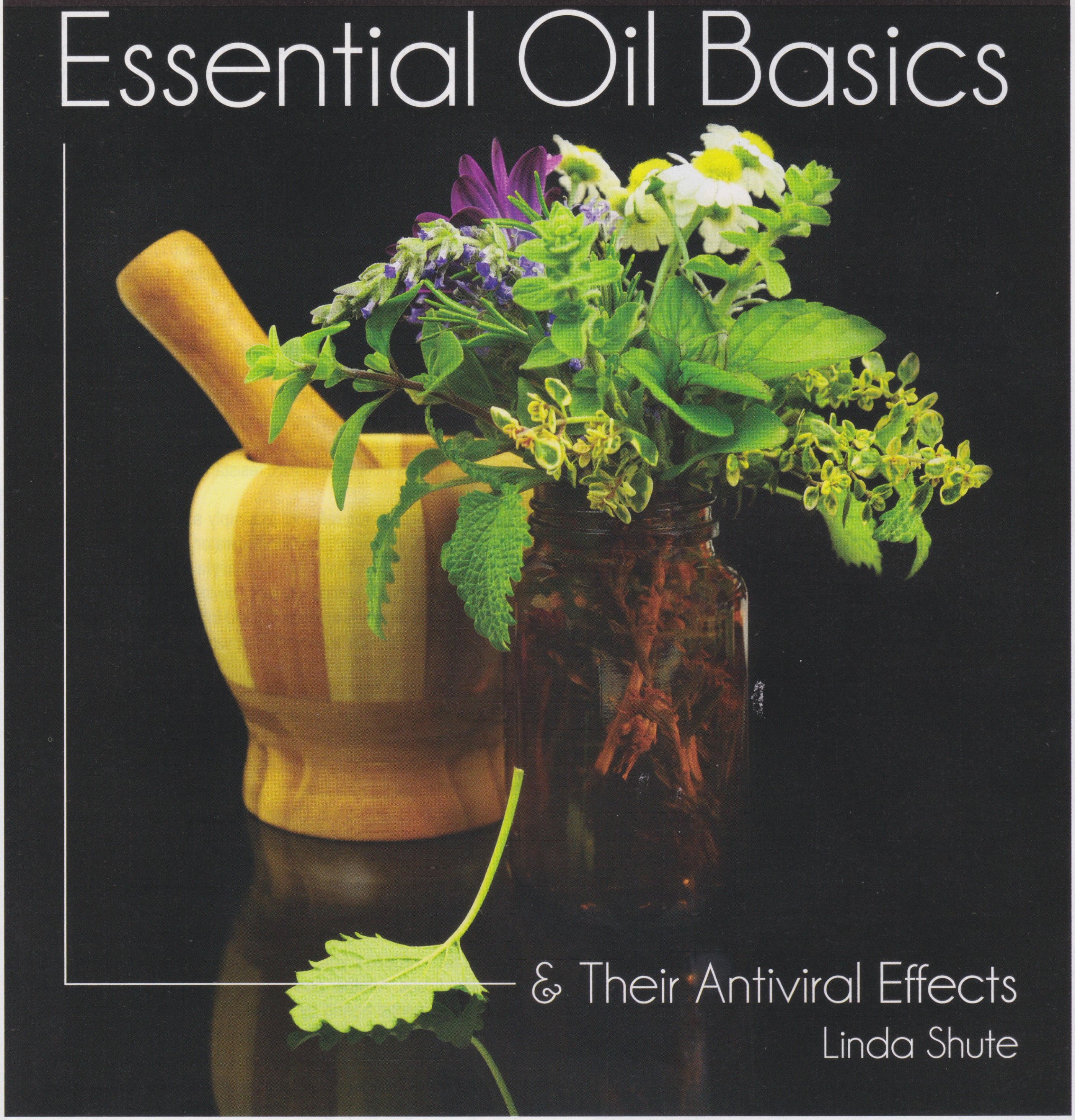
Essential Oil Basics



& Their Antiviral Effects

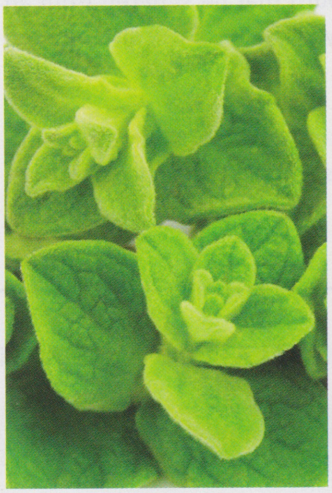
Linda Shute

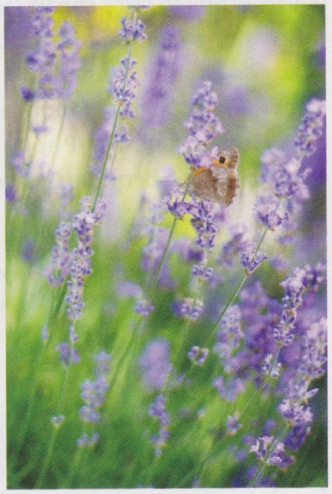
IN THE UNLIKELY EVENT THAT YOU'VE NEVER HEARD OF ESSENTIAL OILS BEFORE, THEY ARE THE NATURAL SCENTED OILS EXTRACTED FROM FLOWERS, FRUITS, BARK, RESIN, LEAVES AND ROOTS OF PLANTS AND TREES VIA STEAM OR PRESSURE. THE OILS COMPOUNDS ARE WHAT GIVE THE PLANT ITS UNIQUE SCENT AND FLAVOR, WHICH IS WHY ESSENTIAL OILS ARE USED IN EVERYTHING FROM FOOD FLAVORINGS TO MEDICINES, AROMATHERAPY AND PERFUMES – AND EVERYTHING IN BETWEEN.

Essential oils are extremely concentrated. To put their concentration into perspective, over 60,000 rose blossoms are used to produce one ounce of rose essential oil, and about 22 pounds of lavender flowers will produce around a single pound of lavender essential oil. These highly concentrated oils are also volatile and evaporate quickly when exposed to open air, so it's important to always recap your bottle.

Essential oil advocates aren't just shilling snake oil to make a buck; the benefits of essential oil are backed by science. A number of scientific studies reveal the effectiveness of essential oils and their potential role in controlling viral infections. A short list of some of these proactive antiviral oils includes basil, cassia, cinnamon, eucalyptus, frankincense, lemon, lemongrass, marjoram, melaleuca (tea tree), myrrh, oregano and thyme.

The National Association for Holistic Aromatherapy specifically recommends using eucalyptus, lemon, lemongrass and tea tree essential oils as natural antivirals. Tea tree oil is also touted for its antibacterial properties. Further, those in the field of essential oils recommend using oregano, thyme, cinnamon, melissa and hyssop to fight viruses, and many studies have shown that a number of additional essential oils fight viruses, bacteria and fungal infections . One thing is for certain: all essential oils have a plethora of unique properties, which is why they should be permanent fixtures in your medicine cabinet.





5 Truly Essential Essential Oils

THE FOLLOWING ARE FIVE OILS EVERY SURVIVALIST SHOULD HAVE IN THEIR PACK. THE UNIQUE PROPERTIES OF EACH OIL AND THEIR USES ARE DESCRIBED.

Oregano or Origanum compactum, has traditionally been used for cooking. Of course, its medicinally properties push this oil beyond the mere seasoning of the odd dish. Oregano has incredible antioxidant, immune-boosting, and respiratory supportive properties.

When choosing your oregano essential oil, it is important to know that there are a number of variations of the oregano species and several specific chemotypes, many of which are not medicinal. As these different species have grown in different climates, the chemical properties of each chemotype have been altered. Having different properties means that differing chemotypes of oregano can be used for different treatments. Keep in mind that the CT Carvacrol chemotype is the one you should be after for its therapeutic properties.

Uses: Beyond those applications previously mentioned, additional uses for oregano essential oil include treatment of colds, flu, coughs, digestion, diarrhea, yeast infection and sore throat. It can also be used as a disinfectant and immune booster. When it comes to mood and emotion, oregano can provide a sense of safety and security.

Properties: Antibiotic, antiviral, antibacterial, antiparasitic, and disinfectant.

Cinnamon Bark or Cinnamomum zeylanicum, is in the Cassia family, and so has similar properties. High quality cinnamon oil comes from Southeast Asia and, depending on which is processed – the tree's leaves or bark – the potential properties of cinnamon oil varies.

Uses: Uses for cinnamon bark essential oil include treatment of exhaustion, lice, rheumatism, constipation, flatulence, low blood pressure, and scabies. When it comes to mood and emotion, cinnamon bark can help relieve stress and exhaustion.

Properties: Antispasmodic, antibiotic, antidiarrheal, antiviral, antiseptic, astringent, stimulant and disinfectant.

Peppermint or Mentha piperita, has been used for centuries by the ancient Romans and the Egyptians for purposes ranging in everything from pharmaceuticals to cosmetics to candies and foods. Currently cultivated in Europe, Australia and North America, this mass produced oil often varies in quality. So be weary of any peppermint oil which is priced very cheap, as the production plant may be processing a high volume product which is impure.

Uses: Beyond those applications previously mentioned, additional uses for Peppermint essential oil include treatment of bronchitis, colds, flu, allergies, asthma, colic, headaches, congestion, indigestion, diarrhea, fever, dermatitis, nausea, migraines, insect bites, menstrual issues, motion sickness, toothache, skin issues, stress, and stomachache. When it comes to the mind, the oil can provide mental acuity and relieve stress or anxiety.

Properties: Anti-inflammatory, antiseptic, antiparasitic, antispasmodic, analgesic, astringent, stimulant and expectorant.

Lavender or Lavandula angustifolia, is a gentle oil that's been traditionally used to heal bruises, cuts and skin irritations, as well as to calm stress and enhance relaxation. The medicinal qualities of lavender were first discovered by the French scientist, René Gattefossé, when he used the oil to help heal a severe burn that he suffered from an explosion in the lab. This highly versatile oil can also be used to help stimulate and energize.

Uses: Beyond those applications previously mentioned, additional uses for lavender essential oil include treatment

Application Methods

ESSENTIAL OILS CAN BE APPLIED IN A VARIETY OF WAYS, SUCH AS THROUGH INHALATION, INGESTION,

INHALATION

The inhalation method triggers your brain function and emotions directly and also benefits your respiratory system. There are a few sub-branches of this method, including, but not limited to, direct inhalation, diffusion, the tissue-jar method, and the steam tent method.

If you choose to directly inhale your essential oils, simply place a couple drops into the palm of your hand and cup the hand over your nose and mouth then breathe deeply. This is perhaps the most effortless of the application methods. You can also purchase empty inhalers, which will last for several weeks once filled.

Diffusion is a commonly used inhalation method, in which you apply your essential oils to a diffuser. A diffuser works similarly to a humidifier or air purifier. Simply add water and a few drops of oil, and the diffuser releases the therapeutic scent into the air via a liquid mist. A great way to combat airborne viruses on your way home from work or school, you can also create a diffuser in your car by stuffing your vehicle's air conditioning vents with cotton balls or gauze lightly dripped over with essential oils. Properly diffused oils are known to kill bacteria and viruses, improve your mental clarity, and calm emotions. Some hospitals have

INGESTION

**Caution – not all essential oils are created equal, therefore read your labels and do your research before taking any internally. Only high quality therapeutic grade oils and ones that are generally regarded as safe (GRAS) by the FDA should be ingested. DO NOT attempt this method with any store-bought essential oil, even those you may find at a health food store, as they are impure!

It cannot be said enough that essential oils are potent. In most cases, one or two drops is plenty! This means that ingesting a large amount of essential oil – like wintergreen, for instance – could make you sick.

If you wish to apply this method safely, simply insert a toothpick into your bottle of oil, and then place the toothpick into a cup of tea. This will supply a large enough amount to be effective. It's also important to note that some oils, though GRAS, are considered hot, such as cinnamon or oregano. They may sting or burn your mouth, so you may not want to ingest these straight and undiluted.

Digestive problems and infections or parasites can be treated through the ingestion method. Apart from ingesting with tea, you can also dilute in your drinking water, take capsules, use the pull method, or self-administer an enema.

of acne, allergies, sprains, vertigo, bronchitis, asthma, arthritis, earache, headache, athlete's foot, burns, bruises, chicken pox, colds, flu, sore throat, flatulence, stomach ache, indigestion, diarrhea, colic, cuts, wounds, cystitis, dermatitis, herpes, dysmenorrhea, hypertension, insect bites, insect repellent, insomnia, labor pains, muscle pain, itching, migraine, nausea, oily skin, rheumatism, scabies, psoriasis, scars, sores, stretch marks, and whooping cough. When it comes to the mind, the oil can mentally ground the user, making them feel balanced and relaxed. It also calms frustration and anger, which is helpful when easing stress or anxiety.

Properties: Antibiotic, anti-inflammatory, antidepressant, antiseptic, adaptogen, relaxant, analgesic, disinfectant, diuretic, and sedative.

Immune Protective Blend

This oil blend combines wild orange, clove, cinnamon, eucalyptus and rosemary. The protective blend addresses bacteria and viruses, boosts the immune system, kills mold, and topically disinfects. In a scientific study, influenza virus infectivity was suppressed by essential oil treatment . After fusion, influenza A virus shuts off host cell protein synthesis and cell replication. As a result, infected cells die by apoptosis or cytolysis. An essential oil blend significantly weakens influenza virus, suggesting that the antiviral effect may be due to inhibition of viral protein translation.

While in the endosome, viral HA protein is activated and the virus fuses with endosomal membranes. After fusion, IAV shuts off host cell protein synthesis and cell replication. As a result, infected cells die by self-destruction or a rupture in the cell's membrane. What this means is that the virus mixes with the body cells and the endosomal membranes – three compartments within the cell – act as a sorting or dividing area, so that the virus is inhibited from growing until it dies off.

OR TOPICAL METHODS. BELOW, WE'LL EXPOUND UPON EACH OF THESE METHODS.

even begun to use diffused oils in the ER. The staff has reported a less stressful environment, beneficial to both workers and patients alike.

If you're on-the-go, the tissue jar method will come in handy. This method involves placing a few facial tissues inside a small 6 to 8 ounce jar and dripping up to 10 drops of the essential oil of your choice onto the tissues. Replace the lid and, when needed, open the jar and breathe deeply before recapping again. One great example for applying this method is when you're preparing for a long drive. Peppermint is an energizer and can be used to prevent drowsiness. A few deep breathes of peppermint oil from your on-the-go tissue jar, and the oil will slap you awake.

The steam tent method can be effectively used when suffering from the cold or flu. All you'll need is a saucepan of hot steaming water and a bath towel. Place a few drops of your selected oil into the water and lean over the saucepan, cover your head with a towel, and breathe deeply. When using the steam tent method, it's usually a good idea to have a box of tissues within reach, especially if you have a cold. The steam will definitely make your sinuses open up (ie, your mucus).

Below, we'll discuss each of these applications.

For appetite suppression or cleansing, you might add citrus oils or blends to cold drinking water and ingest.

You could also choose to take the oils orally through a capsule, as you would traditional medication. Depending on the strength needed, a carrier oil can be added to the capsule to "buffer" the essential oil. You might also blend multiple oils in the same capsule for a specific desired effect. Purchase empty capsules in health food stores, aromatherapy accessory stores, or online. Common capsule sizes are 0 (smaller) and 00, which are a bit easier to fill. The 00 holds about 15 - 20 drops of essential oil (drops may vary in size) and the 0 holds about 10 - 13 drops.

Not quite considered ingestion, the "pulling" method does involve keeping oils in the mouth for a certain length of time. This therapy improves the health of gums and teeth and also detoxifies. To apply the pull method, choose an appropriate carrier oil, such as grapeseed, coconut, or olive oil, and combine 2 drops of an essential oil, such as clove, myrrh, or peppermint. Then, without swallowing, swish and pull the oil mixture through the teeth and around the mouth for 5-10 minutes and spit out the mixture without swallowing. Then brush your teeth.

TOPICAL APPLICATION

**Caution: for hot oils, such as oregano and cinnamon bark, or for use on small children, heavily dilute essential oils with a carrier oil, such as fractionated coconut oil.

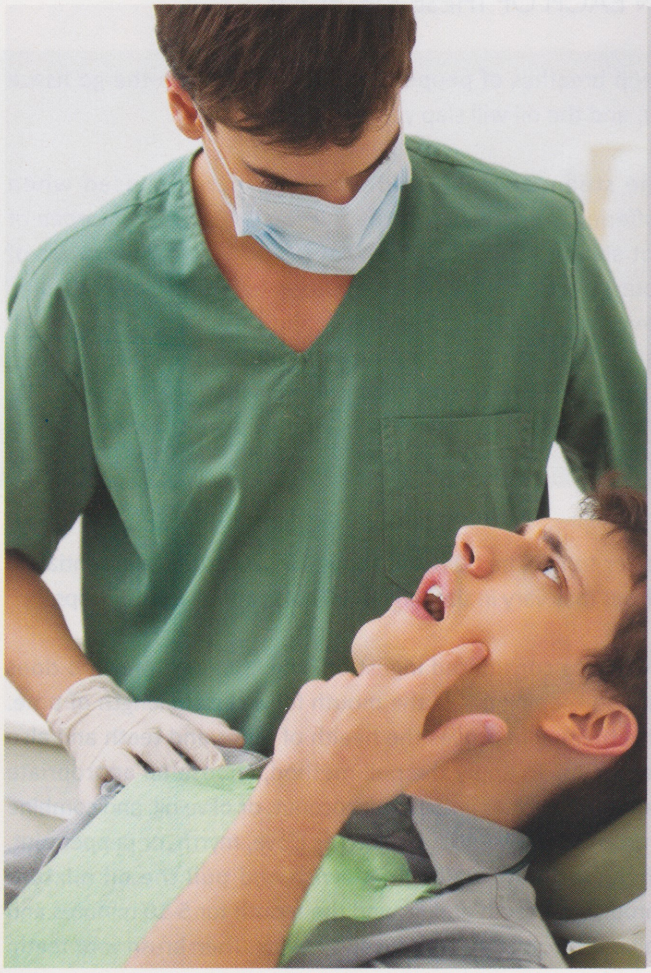
Direct topical application of essential oils works wonders, as skin sops up chemicals and nearly everything else (sunlight, for instance) like a sponge. Topical application is best when you want to clear up an ailment on the skin or in the underlying muscle tissue. When applying topically, you may either massage the oil into the skin or simply drip some on the skin for therapeutic results. Rashes or muscles may be treated in this manner, but you should always test your patient for allergens before applying. Adverse effects are produced by natural chemicals as much as synthetic ones (poison ivy, for example).

To test for allergens, place a drop or two on your patient's inner forearm. If a rash develops within 12 to 24 hours, then the patient is allergic. In addition, phototoxicity – sun exposure resulting in an exacerbated burn – may be an issue when citrus oils are applied topically. So one must proceed with caution when applying essential oils using this method.

Essential oils enter your circulatory system within seconds of being applied to your skin. Health issues – such as aches and pains, bruises, bug bites and stings, etc. – can be eradicated topically in this manner. The oils pass right into your blood stream and circulate throughout the body. While rubbing the oils into the skin, you are also inhaling them, so topical applications are doubly effective. In most cases, you can simply apply directly to the effected area. For headaches, apply to

OTHER

Lastly, unpleasant though it may seem, a self-administered enema can be one of the more effective ways to transport oils deep into the lungs. Though also not technically "ingested," you are inserting the oils into the body via a capsule or a syringe. Affectionately called the "Butt Bomb," this procedure involves filling a 00 capsule with essential oils and carrier oil and inserting it appropriately. Alternatively, you may add the oils and approximately 25 drops of carrier oil to an enema syringe to apply.



CLOVE ESSENTIAL OIL FOR DENTAL PAIN RELIEF

Nothing seems to hurt more than dental pain, especially when no dentist is within reach. Relief from dental pain will help you get yourself up and running again, fast. That's where clove essential oil comes in. The following will walk you through the step-by-step in making a clove essential oil compress to relieve tooth pain.

- Clove essential oil
- Cotton balls
- 1/2 teaspoon of olive oil
- Cotton swabs (optional)

Directions:

First, rinse your mouth with warm salt water. With nothing in your mouth to prevent or block the oil, the clove will be better able to do its job effectively.

Mix a few drops of clove essential oil with ½ teaspoon olive oil. Saturate a cotton ball in this mixture and hold it firmly against the hurting tooth or gum. If you have no cotton balls, use a cotton swab or your finger to rub the oil directly onto the affected tooth or gum. It's important to note, however, that the initial contact may be painful, so be as gentle with your application as you can.

LINDA SHUTE | LINDASHUTEBLOG.COM

your temples, the forehead or the base of your skull at the nape of your neck. You might also consider the reflexology or acupressure charts which illustrate the areas of your hands and feet in order to apply oils to target certain ailments.

You might also apply topically through hot or cold compresses. Hot compresses are typically used for things such as backaches, earache, abscesses, arthritis, and menstrual cramps, while cold compresses can be used for headaches, neck tension, swelling, bruises, sprains and muscle strains. To prepare your compress, fill a small bowl with water and add 5 or 6 drops of oil. Mix well and then soak a towel in the water, gently ringing it out, and placing the compress over the affected area. Let the compress sit in place, until it returns to body temperature and then prepare and reapply, if necessary.

Whichever method you choose, before taking an oil internally, check its references and determine that it is certified GRAS (generally regarded as safe) by the FDA. Using the oils as directed and in moderation, you'll avoid any undesirable side effects that may occur from misuse.

VIRUSES AND ESSENTIAL OILS

Unlike humans, viruses do not discriminate. They don't care about the color of your skin, the vehicle you drive, whether or not you attended college. They couldn't care less about your ethnic background or whether you're rich or poor. If you are infected with a virus and your immune system cannot fight it off, you will inevitably get sick, which may become fatal. Stockpiling a few key essential oils can help protect you and your family against unwanted illness. Furthermore, unlike prescription drugs, essential oils have multiple uses, are affordable, and do not harm our bodies or the environment.

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ESSENTIAL TOOTHPOWDER OR TOOTHPASTE

This superior recipe is economical, fast and fun to make.

Ingredients:

- ¼ cup White Clay (Kaolin)
- 1 teaspoon finely ground Sea Salt
- 1 teaspoon Baking Soda
- 3 to 4 drops Essential Oil of choice (Peppermint, Tea Tree, Cinnamon are recommended)

Directions:

Grind your sea salt in a small herbal grinder*, then press through a small double stainless steel strainer so it's very fine. Next, combine your clay and baking soda with salt. Mix well. Add essential oil, and whisk together until well blended. Place in a dish with a porous covering, and let the toothpowder sit in a dry room for a few hours or overnight. After it's had time to set, whisk again. Bottle in a glass container and label it. Your tooth powder will last for several months.

In order to use your tooth powder as tooth paste, mix in enough vegetable glycerin to achieve the consistency of a paste. Store your toothpaste in a glass jar and label it. This will last for several months.

To use powder: Dampen your toothbrush and dip lightly into the powder. Use as you would a paste. Brush in the morning and evenings.

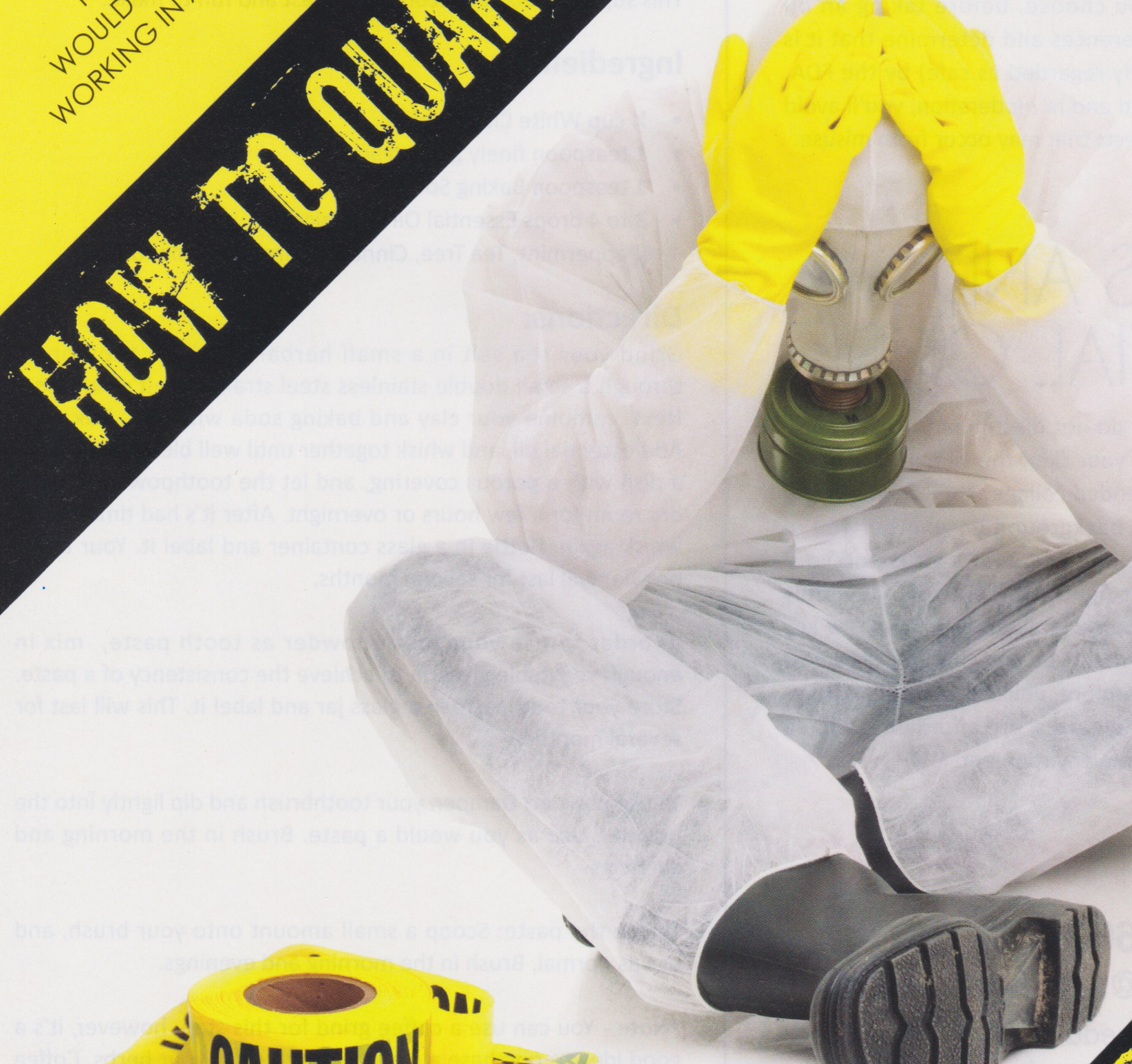
To use the paste: Scoop a small amount onto your brush, and use as normal. Brush in the morning and evenings.

*Note - You can use a coffee grind for this step, however, it's a good idea to purchase a separate grinder for your herbs. Coffee is oily and some herbs will leave traces of flavor in the grinder, which the coffee can then pick up.

HOW TO QUARANTINE YOURSELF

IN EARLY NOVEMBER, TOP MEDICAL EXPERTS AND SCIENTISTS, INCLUDING EXPERTS ON INFECTIOUS DISEASE, MADE A RATHER STARTLING PREDICTION: BY YEAR'S END, DOZENS MORE EBOLA CASES COULD CROP UP IN THE UNITED STATES. RUNNING A PREDICTIVE MODEL ON BEHALF OF THE ASSOCIATED PRESS (AP), THE SCIENTISTS CLAIMED THAT THOSE RETURNING TO THE U.S. FROM WEST AFRICA – THE LARGEST EBOLA-INFECTED REGION – COULD PRODUCE AS MANY AS 130 NEW CASES, WHICH WOULD MOST LIKELY INCLUDE AMERICAN DOCTORS AND NURSES WHO ARE WORKING IN AFRICA TREATING VICTIMS OF THE DEADLY VIRUS, AS WELL AS THOSE FLEEING THE DISEASE.[1]

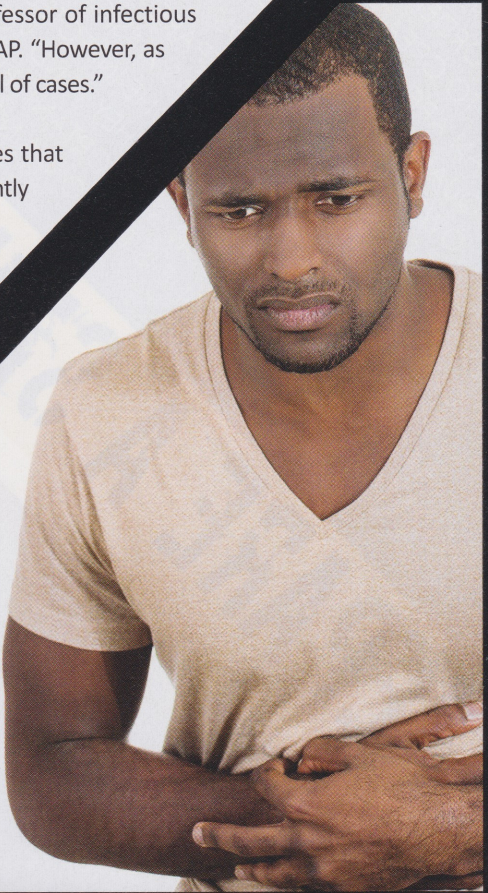
> *Weighing "hundreds of variables, including daily new infections in West Africa, airline traffic worldwide and transmission possibilities," all signs point to the probability that more cases will occur.*



JD HAYS

"I don't think there's going to be a huge outbreak here, no," Dr. David Relman, a professor of infectious disease, microbiology and immunology at Stanford University's medical school, told the AP. "However, as best we can tell right now, it is quite possible that every major city will see at least a handful of cases."

Experts do admit, however, that there is no certainty to predicting the number of cases that may potentially arise in the U.S. and, even if they did claim certainty, experts have frequently been wrong in the past. "Computer modeling," for instance, has consistently "predicted" catastrophic weather and global warming, none of which has occurred.



With the unpredictable nature of a viral menace in mind, it behooves us all to prepare for a potential Ebola outbreak on American soil. In the case of the first U.S. Ebola patient, Thomas Duncan, improper medical conduct has already demonstrated the ease of which this virus could spread. A lax in protocol inside U.S. hospitals could potentially enable the virus to pick up steam and claim more victims, as it did in the cases of nurses, Nina Pham and Amber Vinson, both of whom treated Duncan and consequently became the first two people to contract Ebola in America. They have both since been eradicated of the virus, but the uncertain nature of Ebola and our hospitals' seeming inability to keep it quarantined means that proper self-quarantine techniques will become vital, and may make the difference between life and death for you and your family.

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PREPARE A SICK ROOM

IN ORDER TO CREATE AN AREA OF SELF-QUARANTINE IN YOUR OWN HOUSEHOLD, YOU MUST SEQUESTER AND PREPARE ONE ROOM THAT WILL SERVE AS A "SICK ROOM" -- A PLACE WHERE ANYONE INFECTED WILL BE HELD AND CARED FOR AS THEY (AND YOU) COMBAT THE VIRUS. ISOLATION IS IMPORTANT, BECAUSE THE PURPOSE OF A QUARANTINE IS TO CONTAIN THE DISEASE.

According to Tess Pennington at ReadyNutrition.com, a sick room should either be a bedroom or some other room that is separated from the rest of your home. "Ensure that the room has good lighting, a window that opens, and easy access to a personal bathroom with a sink and running water," Pennington advises.[2]

In that same room, everything to treat the virus should be prepared – from the infected person's medication to the disinfection of those administering treatment. Caregivers should don "personal protective" outerwear whenever caring for the ill, such as a raincoat or other washable outerwear that can be worn over clothing. The outerwear should always remain in the sickroom and be used there to create a protective barrier between you and the illness.

Limiting access to the sick room is also imperative.

The fewer people who enter to "treat" those who are quarantined, the smaller the chance that the infection will spread. Commit to a plan of limited exposure and stick to it. Choose a primary caregiver and prepare a back-up to fill that caregiver's place should he/she become infected; but limit the number of active caregivers to prevent unnecessary exposure to the infection.

DISINFECTANTS AND NATURAL PROTECTANTS

Regular bleach is one of the best over-the-counter disinfectants, due to its price tag and its accessibility. You can stockpile several gallons of bleach in your basement or storage room without taking up much space in your home.

Clorox bleach was introduced to the consumer market a century ago, in 1913; and, ever since, Clorox (and other consumer bleach brands) have played a crucial role in protecting the population from all manner of germs, viruses and diseases.

In addition, bleach has been used to purify and/or clean water so that it is potable (drinkable), especially during times of disaster, when public water supplies have become tainted or otherwise unusable. Bleach is also a go-to germ killer, taking out everything from MRSA to staph and norovirus.

For the purposes of quarantine, bleach can and should be used to clean and disinfect surfaces throughout your home, but especially within the sick room and adjoining bathroom.

Scientists and the Centers for Disease Control and Prevention have said that toilets, sinks and faucets, as well as bathroom counter-tops and other surfaces, will harbor the Ebola virus.

To clean, sanitize and disinfect surfaces, use one cup of bleach (regular bleach; not the scented kind) for every five gallons of water, as per the Centers for Disease Control and Prevention post-disaster instructions.[3] This is a ~2,500 ppm chlorine mixture that will properly disinfect surfaces. For food contact surfaces, the mixture should be further diluted; 1-2 teaspoons of bleach for every gallon of water.[4]

As for hand cleaning, the chlorine solution will do the job, but you can also prepare a vinegar solution, if you prefer a natural approach to skincare. With proven antibacterial, antifungal, antiviral and antimicrobial properties, a vinegar-water solution serves as an effective hand-wash and, in the past, also stood out as one of Europe's leading cleaners.[5]

If you're interested in a more technological approach to sanitation, you might consider the UV light robot. As reported by Natural News editor and "Health Ranger," Mike Adams, researchers in San Antonio, Texas, have completed an ultraviolet (UV) light robot that can zap and kill the Ebola virus in just minutes.

"The Xenex Germ-Zapping Robot uses pulsed xenon-generated UV light to achieve what the company calls 'the advanced environmental cleaning of healthcare facilities,'" Adams wrote. "Because ultraviolet light destroys the integrity of the RNA that viruses are made of, it renders viruses 'dead.'" Technically speaking, viruses aren't "alive" in the first place, so the correct term is "nonviable".

Just like other viruses, UV rays are Ebola's kryptonite, which is why Ebola is much more prevalent in dank, dark places absent from the sun's ultraviolet light.

Adams notes that the machine is already being used in 250 hospitals across the country.

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MARTIN LINLEY

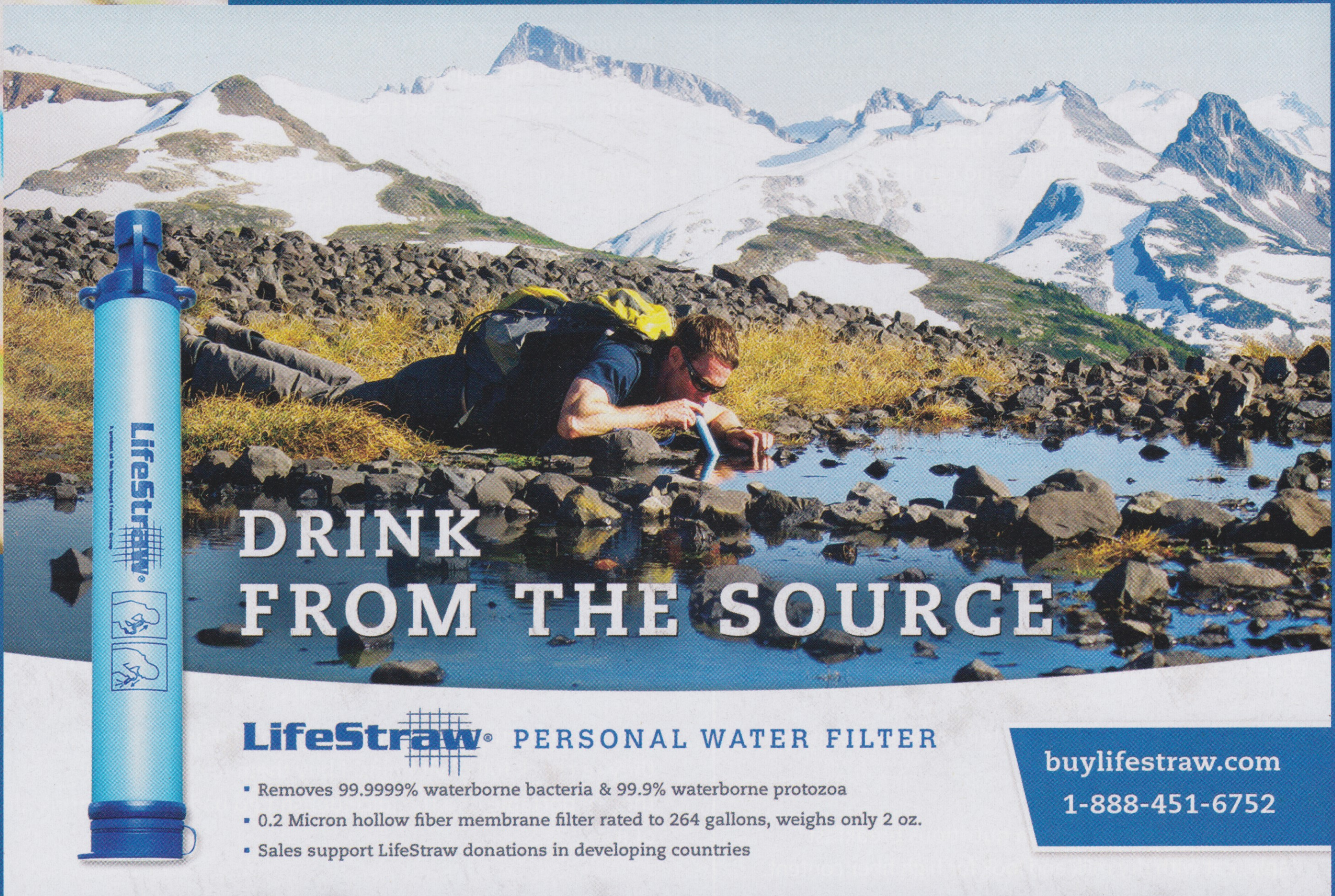
BEST FOODS TO STOCKPILE NOW

Whether you're caught in the blizzard of the century or super storm Sandy, as soon as people hear that disaster is imminent - assuming that they receive any notice at all - shelves at your local grocery store will empty posthaste. You'll be forced to rely on the supplies you've prepared beforehand. Will you be ready? Or will you have to wait for the government to come to your aid...if they come at all?

Here are some general rules of thumb for building your stockpile, as well as some ideas for the best foods to get you started or to supplement what you already have in store.

General rules of thumb:

- Buy things that you will eat. Better yet, for simplicity's sake, start with things that you already eat and branch out from there.
- Buy variety. Since you don't know when things may go south, don't just buy a bunch of jerky and call it good. If social collapse turns the world over and people start looting, tomorrow there may be nothing left when you get there. Buy meats, fruits, vegetables, carbs, etc., even if you have to buy a little over time. Build a broad well-rounded foundation and then expand it.
- Buy gradually. If you have limited funds, start by buying supplies for a 72-hour duration. This is what the Red Cross recommends, as 72 hours is approximately the length of time that most winter storms or power outages last. Then, gradually, work up to a week's worth, then a month's, then six months', then a year or more. This article will cover the nuts and bolts. Long-term storage and bulk foods will be discussed in a subsequent article.
- Start NOW! Do SOMETHING!
- Don't worry about counting calories.
- Buy "productive" foods. Count Chocula may satisfy your sweet tooth, but the pile of sugar lacks nutritional value and will wreak havoc on your blood sugar levels. Sugary cereals aren't "filling" either, so you can count on being hungry soon after you have a bowl...or three. Instead, buy food that's high in calories, high in fiber, rich in vitamins and/or high in protein.
- Store items in a cool, dry, dark environment to preserve their shelf-life.
- Buy multiple smaller portioned items to prevent the waste of opening something bigger that you might not finish.



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- Rotate stock. Buy enough so that it will supply you in an emergency, but watch expiration dates. If something in your stock will soon expire, eat the product and replenish it, rotating your stock continuously over time.

Thoughts about eating in general: while this may not be possible in an emergency or survival situation, you're better off eating several evenly-spaced smaller meals than just the typical three-squares-a-day. This helps keep blood sugar and nutrition levels consistent, which is especially important in trying times. * Smaller portions also bode well for keeping things portable (think Bug-Out-Bag), since you'll be eating 300 or 400 calories, 5 or 6 times a day. Your small meals could be a banana and PB&J or a granola bar and milk.

Begin stocking your pantry

The following comprehensive shopping list should get you started:

- WATER! ---- Buy bottled water as inexpensively as you can. Additionally, buy larger water storage containers from Walmart or similar (pic) and fill them with tap water. Bottled water is much more expensive than tap water but, when kept out of sunlight, the unopened bottles have a year-long shelf-life, are easily portable, and can fit in small areas like the trunk of your car. NEVER be without an adequate water supply.

- A good can opener and a P38 – (or three) as a backup (see pic of p38)

- Peanut butter - Vitamins B3 and E, good fats, protein, calories, stores easily, lasts a long time. Can be heavy to carry in bulk, but it's well worth lugging around.

- Crackers – Preferably, whole wheat (Triscuits, Wheat Thins, Club Crackers). Fiber, carbs and versatility. Crackers make for good peanut butter, meat or cheese "sandwiches" (bread spoils too quickly).

- Dry milk - Mixes well with protein powders for just-add-water instant meal.

- Dry cereal or granola – For a nutritious breakfast staple, eat with dry milk and look for high fiber content.

- Oatmeal - Minute variety for better nutrition and instant kind for BOB and quick cooking. Can't beat "just add water".

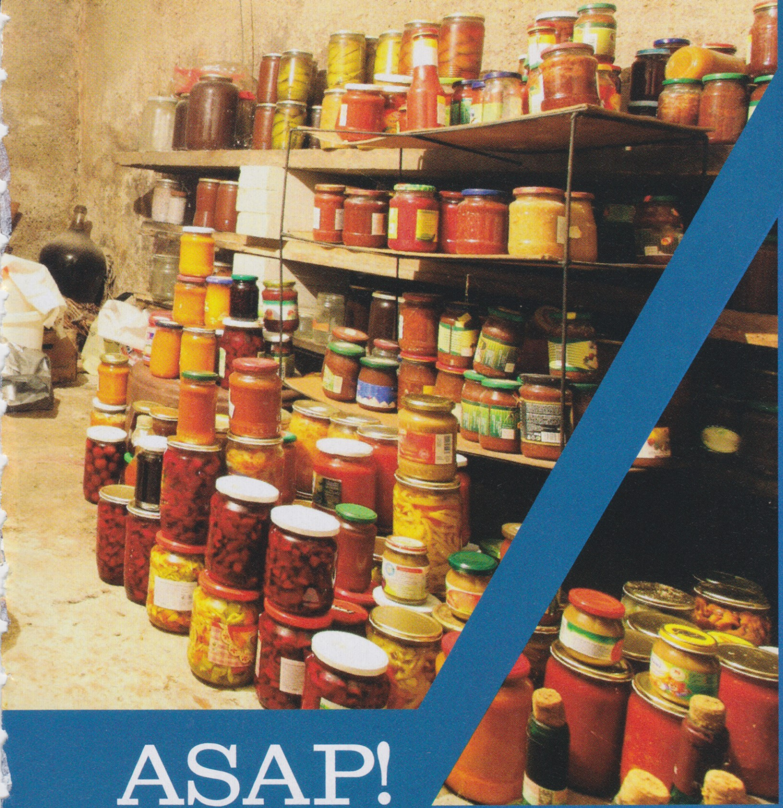
- Canned soup and chili – The water content in most soups, alone, makes them worth having in your stock. Soups also provide your diet sodium, protein, and calories. Can be eaten right out of the can and, to make them even more convenient, some are even designed to be opened without a can opener.

- Canned fruits and vegetables - These aren't the pariah that some people believe. They can be as nutritious as fresh fruits and veggies. Beware of damaged cans however. Shelf-life of two years.

- Protein or granola bars - MetRx makes some power-packed protein bars that taste pretty damn good, but they are expensive. Calorie for calorie, Cliff bars pack the most caloric punch per dollar, they taste pretty good and they store well. I've left them in the sun on the back seat of my car for months, and they still taste fine. They can be kind of heavy in a BOB, but they're a must.

- Ready-to-eat canned meats - Chicken, tuna, salmon, sardines. You can even buy tuna in a bag now instead of a can. TONS of great fats, protein, and calories in a small package.

- Canned or bottled juices - I like V8 and V8 Fusion, because they're chock full o' vitamins. I buy them in cans, because they're portable and the juice doesn't go bad if I don't drink all of it.



ASAP!

- Honey - Raw, unheated, organic - enzymes, amino acids, electrolytes - antibacterial, antimicrobial, antifungal, topical treatment for wounds, burn cream, allergies – honey is a no-brainer. This versatile food can be easily stored for long periods of time.

- Nuts - Protein, calories, fiber and healthful fats.

- Gorp (aka trailmix) - Peanuts, M&Ms, sunflower seeds (shelled), raisins, coconut. Can be heavy, but the mix is power-packed and tasty.

- Summer sausage – Cured meat has a long shelf-life and doesn't need to be refrigerated.

- Salt, sugar, pepper, garlic powder, onion powder - Basic spices will easily make the same rotation of foods more palatable.

- Vegetable oils – Peanut, extra virgin olive, coconut oil, sunflower oil.

- Multivitamins – GNC or Vitamin Cottage are my go-to.

- What about MREs and specially-made survival foods, etc.? Not a bad idea. My only problem with them is, that if S never hits the F, you may never eat your stock and, thus, spent a fortune unnecessarily. On the other hand, the canned tuna or box of oatmeal you now have in your pantry can serve as emergency rations as well as a midnight snack.

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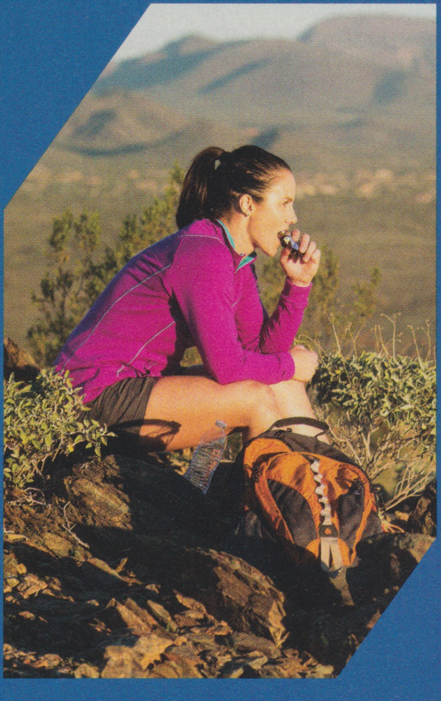
Optional items to consider:

- Dried fruit - Can be expensive but are light, very portable and nutritious.
- Protein Powder – Choose whey protein. GNC makes the tastiest!
- Gatorade and Powerade – Keep you hydrated and replenish your electrolytes when working hard.
- Hard candy – Great for fending off dry mouth, boosting spirits and can provide a small shot of energy.
- Dried potatoes – Carry a long shelf-life and will serve up the comfort food in times that aren't so comfortable.
- Instant coffee, tea, and cocoa – To wake you up in the morning and get you through the day.
- Dry pasta – Whole wheat, preferably.
- Bouillon products - Broths vary and enhance the taste of your meals.



Bug-Out-Bag ****** Food

So you've got your emergency "get home" bag or "bug out bag" that you take with you everywhere, right??? You've got TP and a good knife, various ways to start a fire, rain-gear, long underwear, flashlights...

But what will you pack to keep yourself energized enough to make the trek out of town and back to the homestead?

You can pack away these ideas and then forget about them, until that day comes; although rotating stock annually or semi-annually is always a good idea.

- Cliff bars – Kinda heavy but packed with calories and will last a long time.
- Summer sausage – Tons of energy and sodium. Pretty inexpensive but also has a long shelf-life.
- Instant oatmeal packages – Though they're much better when cooked, you can even just eat these dry with cold water. Boiling water, cooking and cleaning up afterward is not always possibly when you're on the run.
- Pouches of tuna or tuna salad – Super food, lightweight, tasty, nuff-said.
- Freeze dried foods – Lightweight, a good source of vitamins and calories, and can be quite tasty.
- Hard candy – Quick sugar input and staves off dry mouth when hiking.
- Gum – Sugared or otherwise, you'll have no more dry mouth. Also promotes oral hygiene.
- Gatorade or Powerade powder – I mix a half-portion, and it really gives an energy boost when working hard. Drink LOTS if it's hot, and you're expending a lot of energy. Sure, you'll pee a lot, but you'll endure.
- Pop Tarts – They can be tasty, lift your spirits, don't require cooking and are 200 calories each! Are they junk? You bet, but when you're humping your load down the road, and you need energy, you won't care.
- Jerky – Expensive but lightweight and provides tons of protein.
- Multivitamins
- Nuts or Gorp – Can be heavy but lasts a long time and will sustain you.
- M&Ms
- MREs or similar – Long shelf-life, nutritionally balanced, and lightweight.
- WATER and the means with which to boil it.
- Stainless steel water bottle in which to boil water.
- Water purification tablets – Aquamira is one option.
- Water filter – Sawyer is my preference.

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Necessary Accessories

When surviving for any extended length of time, a method for boiling water is a must. Boiled water is necessary to sanitize, clean, cook, etc. Go to REI or Walmart or Amazon and buy:

- Sterno Stove
- Coghlans 9560 Emergency Stove
- Esbit Ultralight Stove
- A small Coleman Stove
- http://www.walmart.com/ip/Mainstays-Grease-Dispenser/32263277 or other sturdy pot.

Also don't forget these VERY important items!

- Hand sanitizer
- Plain unscented bleach – great for cleaning, sanitizing, and purifying water
- TOILET PAPER!!!
- Feminine napkins or tampons
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SURVIVAL NUTRITION

WHEN IT COMES TO FEEDING YOURSELF AND YOUR FAMILY AFTER A CATASTROPHIC EVENT, STOCKING UP ON STORABLE FOOD ISN'T ENOUGH ON ITS OWN.

Stressful survival scenarios require advanced nutritional strategies that will enhance and protect the body and mind. This article will present strategies which support and enhance your body's stress adaptation, injury recovery and cognitive awareness, even while under tremendous stress.

Most preppers are geared up for self defense in terms of firearms and bullets, but they haven't realistically considered the adrenal stress that comes with a high-adrenaline self defense encounter, sleep deprivation, long hours on watch, and even the possibility of dealing with food poisoning due to a lack of refrigeration during a power outage. All these things can severely compromise your ability to think clearly, maintain situational awareness, and make informed decisions in a survival scenario.

For starters, most of the commonly-available survival food is just food, not superfood. It provides a base amount of calories to keep you alive. While staying alive is obviously important, a diet that offers the bare minimum won't give you the nutritional edge you'll need when things hit the fan. As a holistic nutritionist, a long-time prepper, and a person trained in combat handgun and rifle skills, I've helped many preppers design a nutritional preparedness strategy that goes beyond hitting a base calorie count.

IN THIS ARTICLE,, I'LL HIGHLIGHT MY RECOMMENDATIONS FOR SUPERFOODS THAT WILL ENHANCE YOUR SURVIVAL DIET.

WHAT ARE "SUPERFOODS?"

SUPERFOODS ARE FOODS WHICH HAVE A FAR HIGHER NUTRIENT DENSITY THAN EVERYDAY FOODS. CACAO, CHLORELLA, BLUEBERRIES, COCONUT OIL, SPIRULINA, CAMU CAMU, MACA AND EVEN ALFALFA SPROUTS ARE ALL CONSIDERED SUPERFOODS. THEY TEND TO BE NATURALLY HIGHER IN VALUABLE MINERALS THAN TYPICAL PROCESSED FOODS, AND MANY OF THEM ARE GROWN IN SUBTROPICAL CLIMATES SUCH AS CENTRAL AND SOUTH AMERICA.

MIKE ADAMS, THE HEALTH RANGER

All superfoods contain natural medicinal compounds that originate within the plants, themselves. For example, red grapes contain a natural compound called "resveratrol" which has been extensively studied by drug companies in an effort to develop longevity drugs. Chlorella contains "Chlorella Growth Factor" (CGF), and camu camu contains full-spectrum plant-based vitamin C which is far more powerful and complete than laboratory-grade vitamin C (ascorbic acid).

HERE ARE SOME OF THE WORLD'S MOST POTENT SUPERFOODS:

Chlorella: Stores for years and provides chlorophyll, Chlorella Growth Factor, protein, minerals, vitamins and phytonutrients. Chlorella is as close as you can probably come to an emergency all-in-one replacement food that will keep you alive when nothing else is available. Used by high-performance athletes, vegans and people recovering from health problems, chlorella helps support overall wellness with outstanding nutrition.

Coconut oil: This amazing oil supports healthy cognitive function, due to its medium-chain triglycerides (MCTs). Coconut oil is a super healthy source of plant-based fat with a reasonable shelf life and is also the best oil for pan frying, because it resists oxidation at high temperatures. This oil is very easy to work into many recipes (even pancakes) and can even be part of topical first aid recipes, such as salves made with melted beeswax, herbs and oils.

For stress adaptation, I recommend researching adaptogenic herbal formulas containing things like astragalus, ginseng, ashwaganda and medicinal mushrooms, like reishi, cordyceps and maitake. These herbs and mushrooms – available in a wide variety of formats, from powders to capsules – may help assist the body's response to overall stress, providing you with a nutritional boost when your body needs it most.

WHEREAS MOST STORABLE SURVIVAL FOODS MERELY OFFER CALORIES IN THE FORM OF CARBOHYDRATES, PROTEIN OR FAT, SUPERFOODS PROVIDE AN ADDITIONAL LAYER OF FUNCTIONAL "PHYTOCHEMICALS," WHICH OFFER A WIDE VARIETY OF SUPPORTIVE BENEFITS FOR HUMAN HEALTH AND PERFORMANCE. THE BEST OVERALL PREPAREDNESS STRATEGY IS TO STORE PLENTY OF FOOD BASICS, BUT ALSO ADD A HEALTHY COMPLEMENT OF STORABLE SUPERFOODS OR SUPERFOOD-BASED POWDERS AND SUPPLEMENTS TO GREATLY ENHANCE YOUR NUTRITIONAL INTAKE.

Healthy plant-based oils are extremely important for your preparedness planning, and they're usually lacking in most storable food for the simple reason that oils don't typically have a long shelf life. But there's one amazing superfood that solves this problem: chia seeds. These seeds are rich in super-healthy omega-3 fatty acids, and they also contain a fair amount of protein, fiber and minerals, like magnesium. Chia seeds represent one of today's best sources of storable healthy oils, and they're very easy to incorporate into smoothies and recipes. Make sure you store whole chia seeds and not ground chia meal (which has a much shorter shelf life).

For supporting athletic performance and recovery from exertion, nothing beats astaxanthin. This extraordinary nutrient is derived from a unique algae grown in large outdoor pools. Known as "the King of the Carotenoids," astaxanthin provides fat-soluble antioxidants at a concentration no normal food could ever achieve. Astaxanthin is what makes salmon flesh pink-colored, and it's believed to be partially responsible for the incredible endurance of salmon swimming upstream. In addition to supporting endurance, astaxanthin also helps protect brain cells and your entire nervous system thanks to its potent antioxidant properties. Make sure you take astaxanthin with fats or oils, because it is a fat-soluble nutrient.

Several key minerals are also needed to maintain optimum health. Zinc helps support skin healing and boosts immune function to aid your body in resisting airborne infections, such as influenza. It also plays a key role in immune system support and activation. Selenium is a crucial mineral that supports numerous biological processes, and magnesium is extremely useful for relaxation and restful sleep. Most people are deficient in zinc, selenium, magnesium and other trace minerals. A great way to acquire these minerals is to look into a trace minerals supplement or an electrolyte supplement, such as Ultima Replenisher. Note: beware of cheap electrolytes made with artificial chemical sweeteners and fillers such as maltodextrin.

As part of my own nutritional preparedness efforts, I have also stockpiled vitamins C and D, both of which are crucial in healing and recovery when hospitals and doctors aren't readily available. Liposomal vitamin C is far more readily absorbed than other sources, but it's expensive. To save money, you can purchase powdered vitamin C canisters that will store for an extended period of time and can be easily consumed with water or a smoothie. Note: vitamin C is water soluble and exits your body relatively quickly.

Although not a food, colloidal silver is something most preppers are wisely purchasing and storing. The body doesn't need silver as a nutrient, but silver naturally kills bacteria and makes an outstanding topical addition to bandages, wound dressing or gauze. Any burns or serious skin wounds would benefit from being bandaged with either colloidal silver or manuka honey, another topical antibacterial.

Speaking of honey, storing honey is one of the smartest investments you can make when it comes to preparedness foods. Honey lasts almost forever -- they've found edible honey in tombs in Egypt from thousands of years ago -- and it's a valuable barter item. As an added bonus, "manuka" honey is FDA approved as an antibacterial medicine. It's actually used as a wound dressing in commercially-available supplies sold to hospitals around the world. The manuka variety is created by honeybees with access to specific plants such as melaleuca, conferring a proven medicinal property to the honey itself.

I recommend manuka honey as an essential first aid item for lots of reasons. It's sticky enough to stick to wounds, and it functions as its own bandage by physically trapping bacteria in its sticky mass. Plus, it doubles as a backup food source in an emergency. How many other items in your first aid kit can you actually eat for calories?

GROWING YOUR OWN SUPERFOODS

All sprouts are superfoods by definition. They deliver living enzymes and concentrated plant nutrients in a compact, easy-to-grow format. Due to their tremendous nutritional and health benefits, I strongly recommend that all preppers acquire and store sprouting seeds. If you want to spend a little more money, you can also buy automated sprouting machines. However, the easiest way is to use low-cost sprouting bags made out of hemp or other fibers. Simply rinse the bags twice a day, and you'll produce nutritious sprouts for mere pennies a day.

These sprouts can augment your other stored foods, providing essential minerals, enzymes, plant fiber and "phytonutrients" that you probably aren't getting from your stored foods. Sprouting seeds are remarkably affordable and store for a couple of years in a cool, dry location. For maximum immune protection and cancer prevention potential, choose broccoli or radish sprouting seeds. For more general sprouting that tastes less bitter, choose alfalfa or salad green sprouts.

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ADDITIONAL SUPERFOODS TO EXPLORE

Many superfoods are available right at your grocery store. Believe it or not, most berries – blueberries and raspberries, for instance – are superfoods, too. Condiments and spices can also serve as superfoods. Clove spice is a potent antioxidant, while common mustard is also a superfood, derived from mustard plant seeds.

Many nutritionists consider cabbage to be a superfood, and if you juice it raw and drink it quickly, cabbage is even known to cure stomach ulcers after about 30 days of daily consumption.

Turmeric, ginger, garlic and spirulina are some of my other favorite superfoods, and they all confer enormous supportive health benefits that I don't have the space to describe here. You can usually find garlic, ginger and sometimes even turmeric at the local grocery store.

THE BOTTOM LINE ON NUTRITION

The bottom line is that, in a survival scenario, you need much more than a base number of calories and protein. You need the natural medicine that superfoods have been creating for millions of years, long before drug companies ever came into existence. This natural medicine can help keep you alive by supporting stress adaptation, boosting cognitive function and awareness, supporting wound healing and even helping prevent you from catching common diseases that might be circulating in a crisis scenario.

Superfoods alone can't cover all your bases -- you obviously need plenty of calories, carbohydrates and protein to survive -- but superfoods, herbs and strategic supplements can take your survival to a whole new level; one that might make the difference between life and death.

Mike Adams, the Health Ranger, is the creator of BioDefense.com and NaturalNews.com

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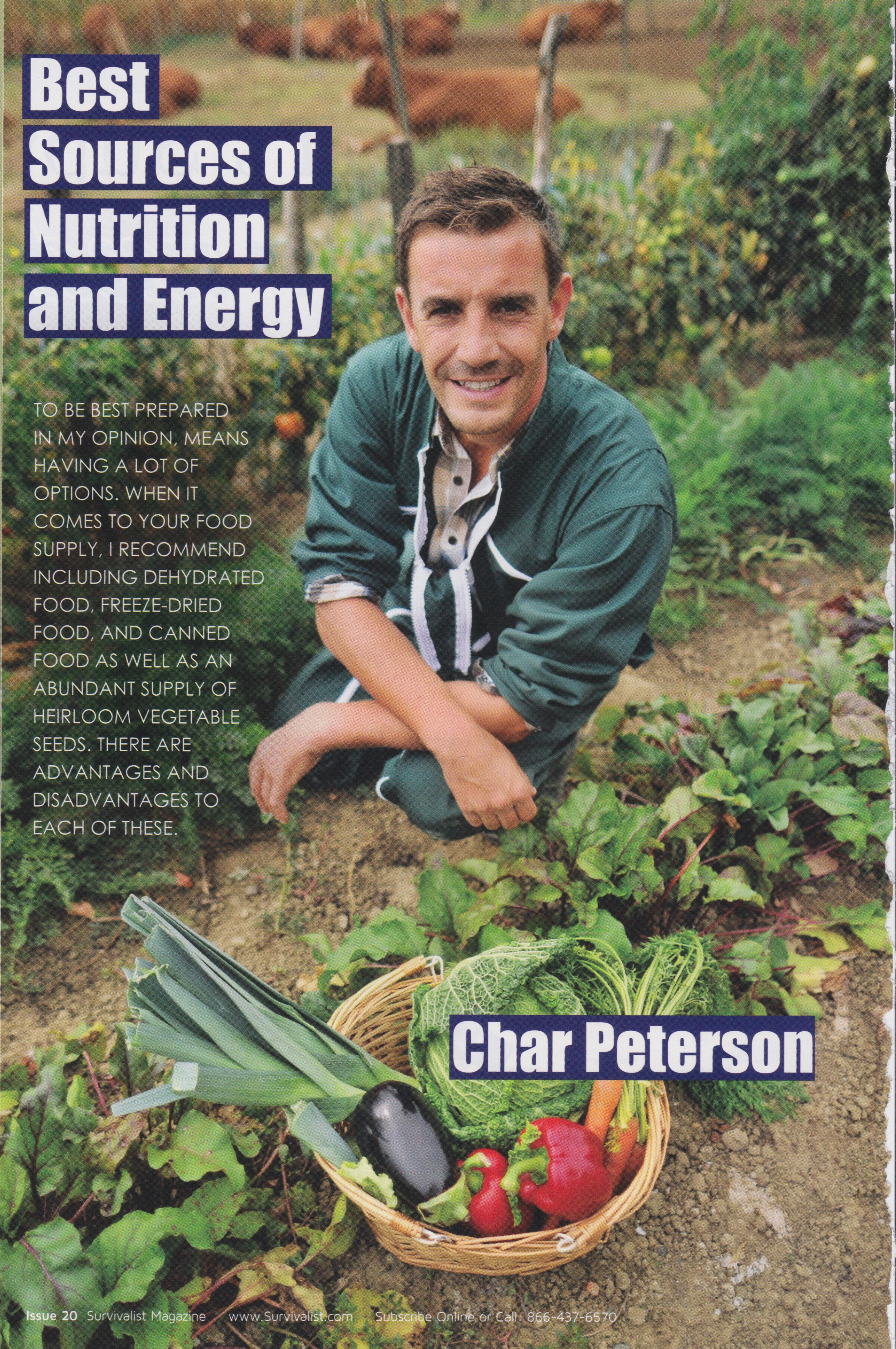


TO BE BEST PREPARED IN MY OPINION, MEANS HAVING A LOT OF OPTIONS. WHEN IT COMES TO YOUR FOOD SUPPLY, I RECOMMEND INCLUDING DEHYDRATED FOOD, FREEZE-DRIED FOOD, AND CANNED FOOD AS WELL AS AN ABUNDANT SUPPLY OF HEIRLOOM VEGETABLE SEEDS. THERE ARE ADVANTAGES AND DISADVANTAGES TO EACH OF THESE.

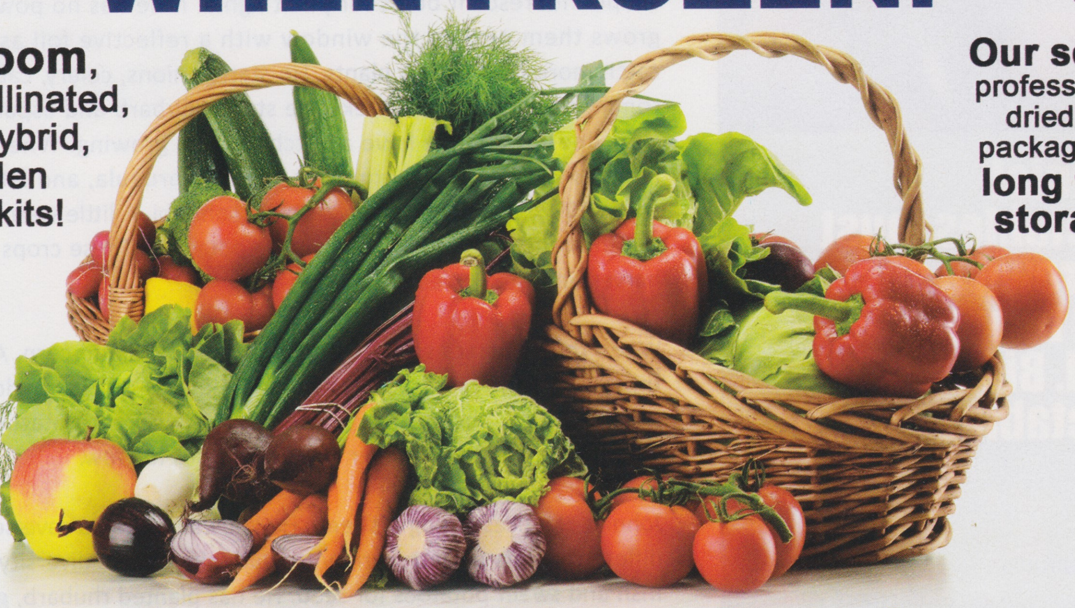
Char Peterson

Both freeze dried and dehydrated foods lose most of their Vitamin C and some Vitamin A, as well as thiamin, riboflavin, niacin. Minerals are lost but if you soak the food and use the water they were soaked in, the loss will be minimal. Iron and fiber do not change. But Vitamin C is quickly destroyed. Vitamin C can be obtained from any fresh greens. Kale, spinach, mustard and turnip greens, beet greens, and parsley are all excellent sources. Read up on the wild greens that grow in your area, especially in early spring.

> *The major problem with almost all food storage systems, is that eventually you will run out of food.*

Purchase whatever food supplies you can afford and have room to store. If you can only do three month's supply of food, do three months. If you can afford five years, get five years' worth of food. We cannot know the exact EMERGENCY situation we are preparing. That means it is unknown how much you'll be needing. There is no sure answer to the problems we may be facing. There is no security. We don't know how or when or how long it will last. We don't know how many people will be eating from this supply. We don't know if we can stay at our location or will be forced to leave. A large supply of food cannot be easily moved. But a few cans of heirloom garden seed is not a problem. The seeds must be dried and stored in the freezer for good germination in years to come. When/if there is no power to run your freezer, it is time to plant your seeds. We DO know all our relatives and neighbors are not preparing and will be hungry. We do know that food will be used to control people and for barter.

The more options you have, the better you will be prepared. If you have lots of dry beans, wheat and rice, it will extend your more expensive stock of freeze dried and dehydrated food. If you have all easy, ready-made entrees, you will soon be tired of them even if there are many varieties. I recommend that you stock some of the ready-made entrees, but many of them are based on pasta, rice, or beans. It would be much more economical, to buy the separate vegetables, freeze- dried or dehydrated, and make your own combinations when the time comes. Just like in todays' grocery store, your best buys are the plain food, not the ready-prepared meals. Shop the outside isles of the grocery store; the fresh fruit and veggies, the meat counter, and the dairy and eggs are all located against the outside walls of the grocery store. They are your best value. We must consider



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Early crops that mature in 3-7 weeks:

Plant in 35° soil:
Spinach, begin to harvest in 40 days
Lettuce, begin to harvest in 50 days

Plant in 40° soil:
Peas, begin to harvest in 55 days
Turnips, begin to harvest in 40 days
Kohlrabi, begin to harvest in 55 days

Plant in 45° soil:
Radishes, begin to harvest in 20 days
Mustard, begin to harvest in 20 days

Biennial vegetables must be grown a second year to produce seed. Biennial vegetables include:

Beets
Broccoli
Brussel sprouts
Cabbage
Carrots
Cauliflower
Celery
Onion
Parsley
Parsnips
Rutabagas
Swiss chard

how much nutrition your dollar is buying. Your prepper dollar will go much further, if you buy food with real value.

I am a big supporter of growing your own food. If your budget is limited, just think of all the food you can grow with some heirloom garden seed. If your soil is reasonably fertile, think of how much nourishment you can produce with a garden. Then save your seed and the following season, you will have seed for a large portion of your community. A single bell pepper has about 300 seeds in it. A small melon has at least 250 seeds. The multiplying possibilities are staggering. I haven't counted the seeds that a single cabbage or onion plant can produce. Tomatoes, okra, lettuce, radishes, green beans, etc. all have a very large capacity to produce seed in your first year. Some crops, like peppers, melons, and squash. can be eaten and the seed saved from the same fruit since you don't commonly eat the seeds. You can squeeze the seeds from a ripe tomato and still eat the tomato. Other crops you will need to leave unharvested, like lettuce, cucumbers, radishes and beans in order to save seeds. Still others, like onions, carrots and cabbages will need to grow a second season before they will produce seed, so you cannot eat the same plant from which you save seed. Tubers like sweet potatoes, and Irish potatoes, will need to be saved from year to year. There are a few perennial crops, like rhubarb, asparagus, and strawberries that can be divided each year to give you more plants. Each clove of garlic if planted, will produce a bulb with 10-20 cloves.

We will give you a picture of the ideal prepper. We will call him Johnny. He begins now to grow a garden. He gains experience. He is healthier because hopefully, he grows as organically as he can. He has extra money from the groceries he didn't need to buy. With this extra money from lower food bills and fewer doctor bills, he can afford to stock up on beans, grains, rice, etc. He buys some spices in bulk to season his food. He buys a few 50 pound bags of salt. He packs this food in buckets or # 10 cans and stores it in a cool place.

In the early spring, Johnny starts his bedding plants in his home. He uses simple fluorescent bulbs for plant lights. If he has no power for lights, he grows them next to the window with a reflective foil as a back drop to catch more light for his plants. He starts onions, celery, cabbages, broccoli, tomatoes, peppers and leeks. He starts rhubarb and asparagus from seed if he doesn't already have a patch of each growing. When his garden soil reaches 35° he is ready to plant spinach, arugula, and lettuce. When the soil is 40°, he can plant peas, turnips, kohlrabi. A little warmer and he seeds radishes and mustard and put in the potatoes. These crops will be ready to harvest in just 3-7 weeks.

When the soil warms to 60° he can plant beans and corn. About that same time, when the last frost has passed, he sets out his bedding plants, and seeds melons, cucumbers, pumpkins, okra, sweet potatoes, summer and winter squash, and whatever else he chooses to grow.

Johnny practices saving his seed. He knows he should save seed from several different plants of each variety to maintain genetic diversity. He saves some Irish and sweet potatoes for seed. He has planted rhubarb, garlic, asparagus, as well as berries and fruit trees if he has the space. He realizes that some crops are biennial and need two years to produce seed. He has extra seed for these crops and part of his seed he saves for the next year. He learns to

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overwinter some of his carrots, parsnips, cabbages, Brussel sprouts, cauliflower, onions, leeks, etc. He will grow these overwintered plants the second season when they will bloom and produce seed. Because of their difficulty, seed from biennial crops will be even more valuable

As he replants his own saved seed, his crops become acclimated more and more to his particular growing conditions. They are more pest resistant and produce better. With sustainable fertility practices, his soil improves. He is able to give or sell seed to his community and teach them to do what he is doing.

If he does not have irrigation, he learns to plant his seeds and plants further apart. Their roots reach deeper into the soil, pulling up more minerals than irrigated gardens. When the economy has major trouble, he will sleep well at night, even if his income is threatened or fails. He knows he has plenty of supplies of food. He becomes a leader in his community, a friend to his neighbors, and helps them get prepared with his extra garden seed and plants.

Even if he does not can, or freeze his vegetables, with planning, he has enough to eat throughout the year. He has learned to preserve vegetables such as cabbage, turnips, radishes, etc. with fermentation. Some vegetables, like green beans, can be dried for winter use. He extends his season as much as he can, both in early winter and late spring. Early in the spring, he plants crops that mature quickly and grow well in the cool weather, such as greens, radishes, peas. He uses wild greens such as lamb's quarters, watercress, and dandelion greens to supplement his supply.

Several crops, such as beans, salad crops and radishes he plants more than once for a continuous food supply. He includes herbs and medicinal plants. He learns what medicinal plants grow in the wild in his area. He also plants some medicinal herbs himself. Even cayenne peppers and garlic are very good medicinals. He plans a fall garden if his location is not too far north. This often includes a second crop of potatoes, broccoli, cabbage, kale, beets, carrots, and other greens. A late crop of potatoes will not produce as much, but it will last longer in the winter. (Potatoes have a natural dormant period of about 100 days after harvest.) When September and October roll around, he plants next year's crop of garlic. He divides berry plants and rhubarb to enlarge his patch or give to neighbors.

Over the winter, Johnny eats potatoes, sweet potatoes, beets, carrots, leeks, kale, garlic, onions, dry beans and corn, and anything else he has preserved. He has planted enough corn to support a few chickens to give him eggs. The chickens get the cucumbers that are too large and other vegetable waste. They are housed in movable pens that move across the unplanted portions of the garden or at times, under the fruit trees. They may even be in very small pens that fit between rows and are moved each day, leaving a portion of tilled, fertilized ground in their wake.

If he does not plant grains, (which take a lot of labor and space) he replaces them with Irish and sweet potatoes in his diet. Or he may choose to plant a large patch of dry beans and corn for use over the winter.

Overall, if/when a collapse comes, Johnny fares much better than his neighbors. His health is better. His food supply lasts much longer. In fact, it lasts indefinitely. He is able to help others. Therefore, he becomes a respected leader in his community.

Complete Organic Fertilizer Formula:

From Gardening When it Counts by Steve Solomon.

(measure by quantity, not weight)

4 parts any kind of seedmeal except coprameal (coconut)

OR

3 parts seedmeal and 1 part blood-and- bone meal (often called tankage or meatmeal). This is higher nitrogen and good for leafy spring crops.

BLEND WITH

¼ part finely ground agricultural lime
¼ part gypsum
½ part dolomite lime
½-1 part kelpmeal or 1 part basalt dust

PLUS

1 part of one of these for phosphorus: Finely ground rock phosphate, bonemeal or high phosphate guano

Mix and apply in spring; 4-6 quarts to each 100 square feet of raised bed, or down each 50 foot of row, in a 12-18 inches wide band.

Now we know that this story is just a story. BUT it carries a whole lot more hope and promise than the other options. The other option is that when you run out of your stored food, whether you become dependent on the government or the neighbor, whoever has a little food, you will become their slave.

Thirty rows of 40 feet each plus a few raised beds, will grow plenty of food for 6-8 adults. This is preserving green beans, cabbages, carrots, sweet potatoes, Irish potatoes, garlic, onions, squash, and lots of different sauces with tomatoes for use over the winter. Having said that, I hesitate, because growing conditions can vary so much. That is one good reason to plant a large variety of food. Is there enough moisture? Is the soil fertile? Is the garden tended well? Different crops and different varieties thrive or fail under different conditions. How much do these adults eat? If they do a lot of manual labor, their food requirements will be greater. Do they have any other food to supplement the vegetables with, such as grains, dairy, meat, eggs, fruit, berries, etc.? If not we will need to grow another 4,000 square feet of more potatoes and corn and dry beans.

We encourage you to take some action. At the very least, get some heirloom seeds. Plant a tiny garden. You will be rewarded and realize that simple food production is something you can quite easily accomplish.

Product Spotlight

Useful Tools for Survival

Oliso Pro VS97A Vacuum Sealer

The Oliso®PRO™ VS97A provides solutions to one of the biggest challenges sportsmen are up against…room in the freezer! The Oliso® VS97A condenses food to its bare minimum by utilizing airtight storage with professional grade vacuum strength.

The sleek, compact and durable design makes it easy to pack for the campsite, hunting or fishing trip, giving you the option or sealing your fresh catch or wild game on-site. Each unit comes with a water-resistant carrying case and both the AC and 12V DC car adapter. The Oliso® VS97A revolutionary punch-and-seal process saves time and money as well as eliminating package cutting, reducing waste and overall cost of sealing! The reusable Vac-Snap bags are available in quart, gallon and jumbo size. The double zippered bags are dishwasher-safe and are reusable up to 12 times with full capacity!

The superior performance of the Oliso®PRO™ is backed by the industry's only extended three-year warranty, ensuring satisfaction for many years of use.

I was excited to try this product having owned a sealer made by a different brand and with a roll style of bags. I could not be happier with this brands performance. In less than five minutes from opening the package, after reading the clear and concise directions I had vacuumed sealed my first item. I waited to thoroughly review the entire package until I could go thru a freeze/thaw cycle with the bags and be able to clean and reuse the bag. The ability to reuse the smaller bags up to ten times and the larger bags up to 12 times is what separates this sealer from the other brands. The blow molded case is a huge plus for storage and portability. Not sure I will use the unit's ability to work from my vehicles 12 volt port, but can see this being handy to some for who field dressing is their preferred method. I would rate this unit as hands down a more innovative sealer than any other on the market. I sealed both dry and wet items and the unit worked flawlessly in both instances.

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COLD WEATHER
MEDICAL ISSUES

JOE ALTON, M.D. AKA DR. BONES

Winter is coming, as Game of Thrones fans like to say, and it really is. This Winter is slated to be one of the coldest, with a cold wave affecting much of the country in mid-November, including record early onset of snows in many places. Failing to prepare for the Winter makes the environment your enemy, and it's a formidable one.

When you are in an off-grid setting, careful planning is necessary to avoid running afoul of the elements. One major environmental risk is the effect of ambient temperature. Humans tolerate a very narrow range and are susceptible to damage as a result of being too cold. Your body has various methods it uses to control its internal "core" temperature, either raising it or lowering it to appropriate levels. The body "core" refers to the major internal organ systems that are necessary to maintain life, such as your brain, heart, liver, and others. The remainder (your skin, muscles and extremities) is referred to as the "periphery".

HYPOTHERMIA

Illness related to exposure to extreme cold is referred to as "Hypothermia". The body loses heat in various ways:

Evaporation – the body perspires (sweats), which releases heat from the core.

Radiation – the body loses heat to the environment anytime that the ambient (surrounding) temperature is below the body's core temperature (say, 98.6 degrees Fahrenheit).

Conduction – The body loses heat when its surface is in direct contact with cold temperatures, as in the case of someone falling from a boat into frigid water. Water, being denser than air, removes heat from the body much faster.

Convection – Heat loss where, for instance, a cooler object is in motion against the body core. The air next to the skin is heated and then removed, which requires the body to use energy to re-heat. Wind Chill is one example of air convection: If the ambient temperature is 32 degrees F but the wind chill factor is at 5 degrees F, you lose heat from your body as if it were actually 5 degrees F.

The normal body core temperature is defined as between 97.5-99.5 degrees Fahrenheit (36.0-37.5 degrees Celsius). The body kicks into action to produce heat once the core cools down below 95 degrees Fahrenheit (35 degrees Celsius), the temperature below which hypothermia occurs. The main mechanism to produce heat is shivering. Muscles shiver to produce heat, and this will be the first symptom you're likely to see. As hypothermia worsens, more symptoms will become apparent if the patient is not warmed.

Aside from shivering, the most noticeable symptoms of hypothermia will be related to mental status. The person may appear confused, uncoordinated, and lethargic. As the process worsens, speech may become slurred; the patient will appear apathetic or uninterested in helping themselves or may fall asleep. This occurs due to the effect of cooling temperatures on the brain; the colder the body core gets, the slower the brain works. Brain function is supposed to cease at about 68 degrees Fahrenheit, although I have read of exceptional cases in which people (usually children) have survived even lower temperatures.

An ounce of prevention is worth a pound of cure. To prevent hypothermia, consider the following:

- Anticipate the climate that you will be traveling through, including wind conditions and wet weather.
- Condition yourself physically to be fit for the challenge.
- Travel with a partner.
- Have adequate nutrition and hydration available.
- Wear clothing in loose layers. Especially cover the head, neck, hands and feet. Wool is better than cotton.
- Remain dry.
- Rest when necessary; use rest periods to self-assess for cold-related changes.
- Pay careful attention to the status of your elderly or juvenile group members.

As with many other situations, the very young and the elderly are most at risk for hypothermia. Diabetics and those who suffer from low thyroid levels are also more at risk. One factor that most people don't take into account is the use of alcohol. Alcohol may give you a "warm" feeling, but it actually causes your blood vessels to expand, resulting in more rapid heat loss from the surface of your body. The body reacts to cold by constricting the blood vessels, so expansion would negate the body's efforts to stay warm. Alcohol also causes impaired judgment, which might cause those under the influence to choose clothing that would not protect them in cold weather. This also goes for various "recreational" drugs.

The diagnosis of hypothermia is difficult to make with a standard glass thermometer, which doesn't register below 94 degrees Fahrenheit. Unless you have a thermometer that can measure low ranges, it may be difficult to know for certain that you're dealing with this problem. However, if you encounter a person in a cold environment who is unconscious, confused or lethargic, and whose temperature does not register, you should always assume the patient is hypothermic until proven otherwise.

If left untreated, hypothermia leads to complete failure of various organ systems and to death. People who develop hypothermia due to exposure to cold are also vulnerable to other cold-related injuries, such as frostbite and immersion foot.

FROSTBITE

Frostbite, or freezing of body tissues, usually occurs in the extremities and sometimes the ears and nose. Initial symptoms include a "pins and needles" sensation and numbness. Skin color changes from red to white to blue. If the color then changes to black, a condition known as "gangrene" has set in. Gangrene is the death of tissue resulting from loss of circulation. This usually results in the loss of the body part affected.

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IMMERSION FOOT (TRENCH FOOT)

Immersion foot (formerly known as Trench Foot) causes damage to nerves and small blood vessels due to prolonged immersion in water. When seen in areas other than the feet, this condition is referred to as chilblains. Immersion foot appears similar to frostbite, but might have a more generally swollen appearance.

What to Do:

Immediate action must be taken to reverse the ill effects of hypothermia. They are:

- Get the person out of the cold and into a warm, dry location. If you're unable to move the person out of the cold, shield him or her from the cold and wind as much as possible.
- Take off wet clothing. If the person is wearing wet clothing, remove them gently. Cover them with layers of dry blankets, including the head (leave the face clear). If you are outside, cover the ground to eliminate exposure to the cold surface.
- Monitor breathing. A person with severe hypothermia may be unconscious. Verify that the patient is breathing and check for a pulse. Begin CPR if necessary.
- Share body heat. To warm the person's body, remove your clothing and lie next to the person, making skin-to-skin contact. Then cover both of your bodies with blankets. Some people may cringe at this notion, but it's important to remember that you are trying to save a life. Gentle massage or rubbing may be helpful, but vigorous movements may traumatize the patient
- Give warm oral fluids. If the affected person is alert and able to swallow, provide a warm, nonalcoholic, non-caffeinated beverage to help warm the body. Remember, alcohol does not warm you up!
- Use warm, dry compresses. Use a commercial first-aid warm compress or a makeshift compress of warm (not hot) water in a plastic bottle. Apply a compress only to the neck, chest wall or groin. These areas will spread the heat much better than putting warm compresses on the extremities, which sometimes worsens the condition.
- Don't apply direct heat. Don't use hot water, a heating pad or a heating lamp to warm the person. The extreme heat can damage the skin, cause strain on the heart or even lead to cardiac arrest.

COLD WATER SAFETY

If you remember the movie "Titanic", you saw hundreds of people bobbing in the freezing ocean after the sinking. Exposure of a large area of the body to cold water causes heat loss very quickly, and you can bet that just about everyone in the water was beyond medical help within 15 minutes of exposure. In the event that you find yourself in cold water, you'll need to have a strategy that will keep you alive until you're rescued. First, we'll talk about falling into the water when your boat capsizes, and then we'll talk about falling through the ice on a wilderness hike.

Water doesn't have to be cold to cause hypothermia. Any water that's cooler than normal body temperature will cause heat loss. You could die of hypothermia off a tropical coast if you are in the water long enough. To increase your chances of survival in cold water, do the following:

- Wear a life jacket. Whenever you're on a boat, wear a life jacket (did I really have to tell you?). A life jacket can help you stay alive longer by enabling you to float without using a lot of energy and by providing some insulation. The life jackets with built-in whistles are best, so you can signal that you're in distress.
- Keep your clothes on. While you're in the water, don't remove your clothing. Button or zip up. Cover your head if at all possible. The layer of water between your clothing and your body is slightly warmer and will help insulate you from the cold. Remove your clothing only after you're safely out of the water and then do whatever you can to get dry and warm.
- Get out of the water, even if only partially. The less percentage of your body surface out of the water, the

less heat you will lose. Climbing onto a capsized boat or grabbing onto a floating object will increase your chances of survival. However, don't use up energy swimming unless you have a dry place to swim to.

- Position your body to lessen heat loss. Use a body position known as the Heat Escape Lessening Position (think H.E.L.P.) to reduce heat loss while you wait for help to arrive. Just hold your knees to your chest; this will help protect your torso (the body core) from heat loss.
- Huddle together. If you've fallen into cold water with others, keep warm by facing each other in a tight circle and holding on to each other.

FALLING THROUGH THE ICE

How about if you're hiking in the wilderness, and that snow field turns out to be the icy surface of a lake? Whenever you're in the wilderness, it makes sense to take a change of clothes in a waterproof container so that you'll have something dry to wear if the clothes you're wearing get wet. Also have a firestarter that will work even when wet.

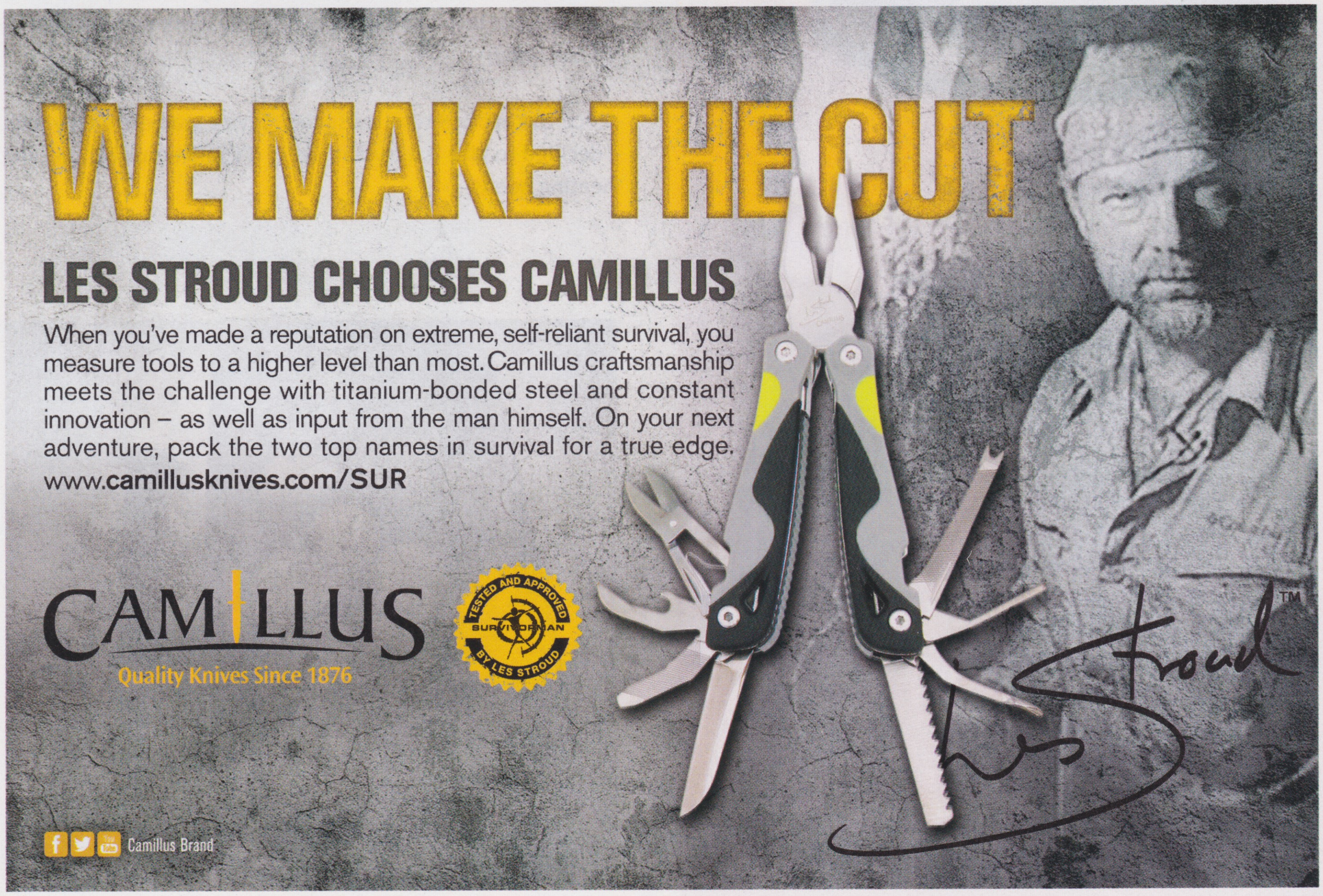
You might be able to identify weak areas in the ice. If a thin area of ice on a lake is covered with snow, it tends to look darker than the surrounding area. Interestingly, thin areas of bare ice without snow appear lighter! Beware of areas of contrasting color as you're walking.

Your body will react to a sudden immersion in cold water by an increased pulse rate, blood pressure, and respirations. Keep calm. You have a few minutes to get out before you succumb to the effects of the cold. Panic is your enemy.

Get your head out of the water by breathing in and bending backward. Tread water and quickly get rid of any heavy objects that are weighing you down. Turn your body in the direction of where you came from; you know the ice was strong enough to hold you there.

Now, try to lift up out of the ice using your hands and arms. Keep them spread in front of you. Kick with your feet to give you some forward momentum and try to get more of your body out of the water. Lift a leg onto the ice and then lift and roll out onto the firmer surface. Do not stand up! Keep rolling in the direction that you were walking before you feel through. This will spread your weight out, instead of concentrating it on your feet. Then crawl away until you're sure you're safe. Start working to get warm immediately.

The prepared outdoorsman will have the knowledge and equipment to keep ahead of the weather in any environment. Prepare for that Winter wilderness outing, and you'll keep it together, even if everything else falls apart.



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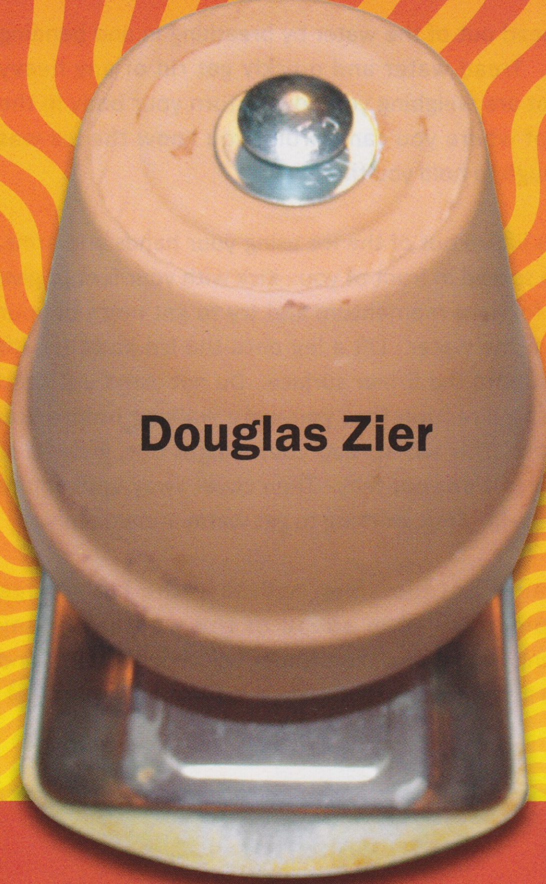
Flower Pot Heater Project

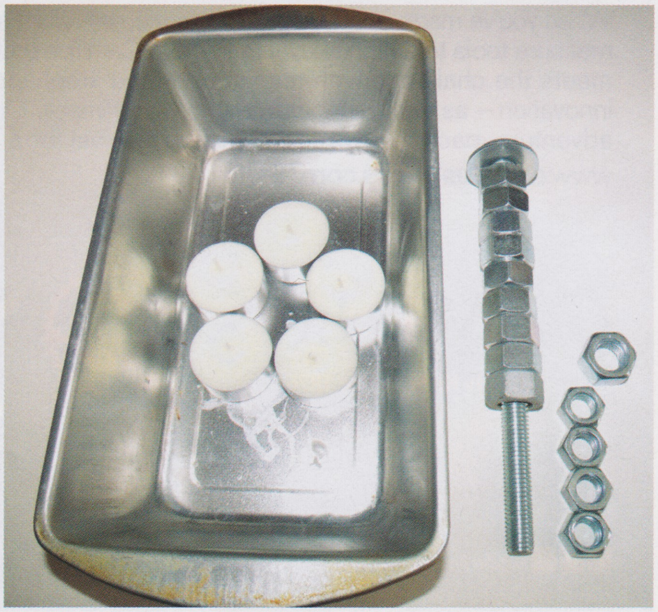


Douglas Zier

As the Scouts say "be prepared", as it is far better to have and not need than the alternative. Hence, this article which was born out of a specific need that I wanted to address. I have always been a very early A.M. person as in 5:00 – 5:30 a.m. riser. I am normally turning on the computer and fixing my first cup of coffee, but at that time of the morning I do not want to turn the thermostat up and heat the whole house just so I could work in the comfort of my 10X10 den.

I have seen several articles and You Tube videos regarding the benefits or lack thereof for the "Flower Pot Heater". I found a variety of different designs that run the spectrum of effectiveness from "it warms my work space to a comfortable level, to it cannot possibly work well enough to fill the need.

Since the expenditure for such a device was extremely low, I decided to give it a try and see if it could actually meet my heating needs.



Actual parts summary:

(1) Standard 11 X 6 inch bread pan

(1) 7 inch terra-cotta flower pot

(1) 8 inch ½ inch threaded bolt

(4) Nuts to fit the bolt

(10) Nuts large enough to slide down the bolt

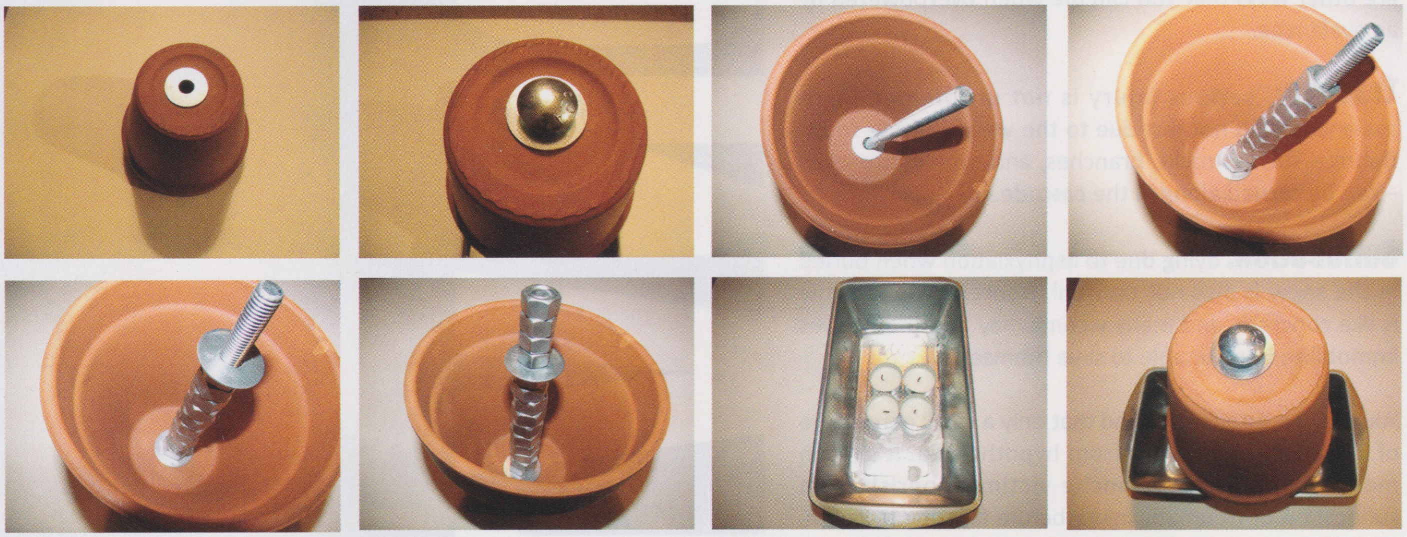
(4-5) 6 hour tea lights (I found the 6 hour tea lights produced a much greater amount of heat and could be re lit if the full 6 hours have not used.)

I settled on these components after numerous trials to best create adequate heat to make my working space comfortable.

Step by step installation:

1. Turn the pot small end up and place one large washer over the hole
2. Slide the bolt into the hole
3. Turn the pot over place the large end up
4. Slide one washer down the bolt to the bottom
5. Slide all 10 oversized bolts down the bolt
6. Screw one of the small nuts down the bolt so it attaches tightly to the last of the ten oversized bolts
7. Screw the remaining three nuts onto the bolt and make sure they tighten
8. Turn the pot over with the small end up and check that the bolt is attached Tightly
9. Place the (4) 6 hour tea lights into the center of the bread pan
10. Light all of the tea lights
11. Place the assembled flower pot on top of the bread pan and center it

You are now ready for the pot to heat and produce your radiant heat



As a current testimonial to the effectiveness of this device the temperature in Denver Colorado is currently -1 degrees. The temperature in my bedroom with the door closed is currently 62 degrees. In approximately 30 minutes the temperature in my Den has reached 71 degrees.

Hints to help installation:

Make sure your four threaded nuts can easily be turned for the entire length of the bolt without any snags.

Safety concerns:

Please follow safety procedures regarding the use of a lit candle and be aware that the pot and the metal bolt will be extremely hot.

As a current testimonial to the effectiveness of this device the temperature in Denver Colorado is currently -1 degrees. The temperature in my bedroom with the door closed is currently 62 degrees. In approximately 30 minutes the temperature in my Den has reached 71 degrees. The Flower Pot Heater functions like the old water radiators and produces an ample amount of radiated heat for the approximate 6 hour life of the tea lights.

Please be aware that this device is not intended to be a house warmer and only works for a small sized room such as mine, but can satisfy your needs in a pinch, or if you need a warm space when the power goes out.

Happy heating!!!!!!!!

AVALANCHE!

An Avalanche is a mass of snow, ice, and debris sliding rapidly down a slope. A risk for any winter hiker, avalanches cause an average of 28 deaths a year. This may seem like a rare occurrence, but they happen a lot more often than more publicized events, like shark attacks, for instance.

Snowslides are part and parcel to the mountaineering experience, and whether you're a mountaineer or not, it pays to know what to do if you're caught in one. This is not just good advice for skiers or back country campers; anyone driving on mountain roads in winter could be the unsuspecting victim of an avalanche if ill prepared.

What Happens to the Victim of An Avalanche

Besides general hypothermia due to exposure, there are other ways that you can die when overpowered by an avalanche.

Trauma: serious injury is not uncommon in an avalanche, and not just due to the weight of the snow. Debris – such as rocks, branches, and even entire trees – can be carried along in the cascade.

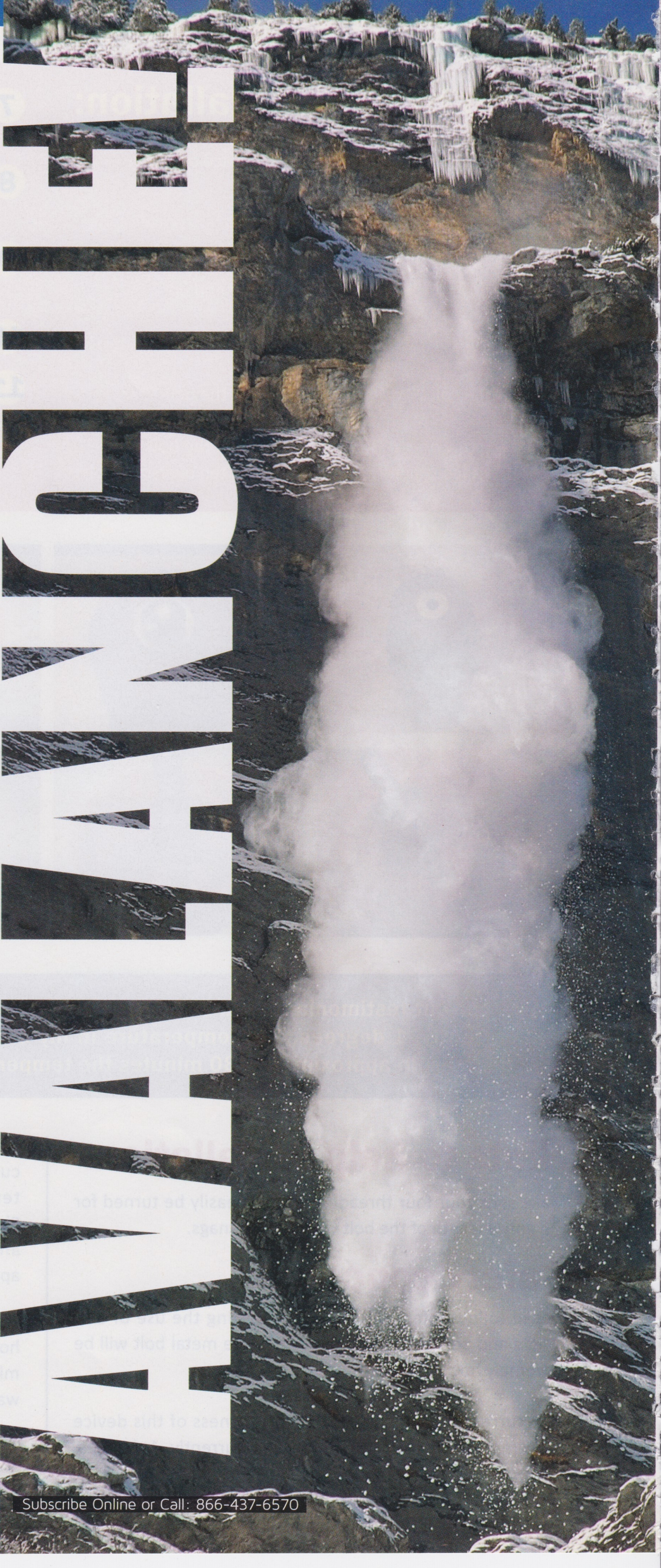
Suffocation: dying due to asphyxiation when buried in the snow is also not unusual. Densely packed snow is like concrete, and many victims may find themselves immobilized and unable to save themselves.

You may be surprised to find that only a small percentage of avalanche victims die from hypothermia. It's much more likely for an avalanche victim to perish from suffocation or traumatic injury before freezing to death. Factors that may decide your fate include the density of the snowpack, air pockets for breathing, the position of your body in the snow, injuries sustained, and whether or not your party has taken rescue equipment along.

SURVIVAL BASICS

On any wilderness outing, traveling in a group makes practical sense. That goes for avalanche country, as well, apart from one difference: when in a caravan, space yourselves out far enough so that there's not too much weight on any one area of snow. Specialized gear for the avalanche-conscious would include (besides clothing that protects against the cold, of course):

An avalanche beacon: This device emits a pulsed radio signal. Everyone in the group should carry one. If a member gets buried in an avalanche, the rest of the party will pick up the signal from under the snow. The receivers interpret the signal into a display that will aid the search.



Joe Alton, M.D., aka Dr. Bones

An avalanche shovel: These are special short aluminum shovels that fit inside your backpack and help chop and remove snow and debris from a buried hiker. These shovels usually have telescoping shafts. Shovels with D-shaped grips can be used with mittens.

An avalanche probe: Essentially, an avalanche probe is a stick that will pinpoint the exact location of an avalanche victim and will detect how deep he/she is buried. 2 meters or more in length, you can use the probe to distinguish a victim under the snow from the ground; the victim will feel "softer".

A helmet: Many fatalities occur due to head trauma from rocks and debris flung around by the snow. If you're in avalanche country, it's smart to wear a helmet.

Skier's air bags: Relatively new, these brightly colored air bags auto-inflate with a trigger, working like a life jacket to keep you buoyant and, therefore, closer to the surface and easier to find.

What to do as the Avalanche Begins

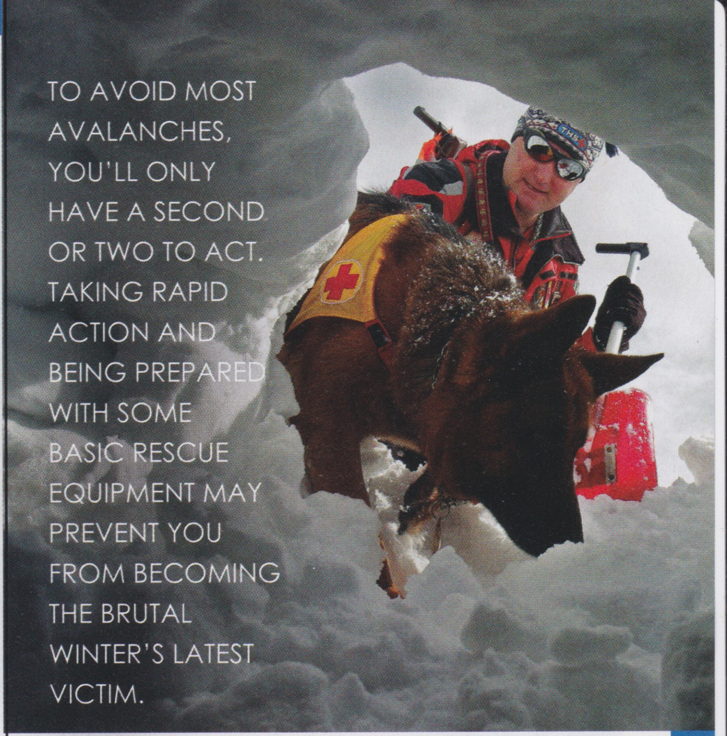
90% of avalanches are triggered by the victim. To survive, the following rapid action will be needed:

Yell. Let everyone in your group know that you're in trouble. At the very start of the slide, wave your arms and shout as loud as you can to alert as many people as possible to your location.

Move. If you triggered the avalanche, you may notice a crevice forming in the snow. Jump uphill of this crevice quickly, and you might not get carried off. If this isn't an option, run sideways as fast as you can, away from the center of the event, which is where the snow will be descending fastest and with the most force.

Get Lighter. Heavier objects sink in snow, so jettison your backpack and unnecessary heavy equipment so that it won't weigh you down. If the avalanche is bound to take you down with it, the closer to the surface you are, the better. Discarding something light isn't a bad idea either: A loose glove or hat on top of the snow could signal rescuers to your general location and save precious time. Deploy your avalanche air bag if you have one.

Hug a tree (or rock). If the avalanche is relatively small, you could grab the nearest immobile object and hold on for dear life. In a very large avalanche, trees and rocks may not be safe anchors; trees can be uprooted by the force of the snowslide and, thus, become one of the heavy objects which you've just discarded.



TO AVOID MOST AVALANCHES, YOU'LL ONLY HAVE A SECOND OR TWO TO ACT. TAKING RAPID ACTION AND BEING PREPARED WITH SOME BASIC RESCUE EQUIPMENT MAY PREVENT YOU FROM BECOMING THE BRUTAL WINTER'S LATEST VICTIM.

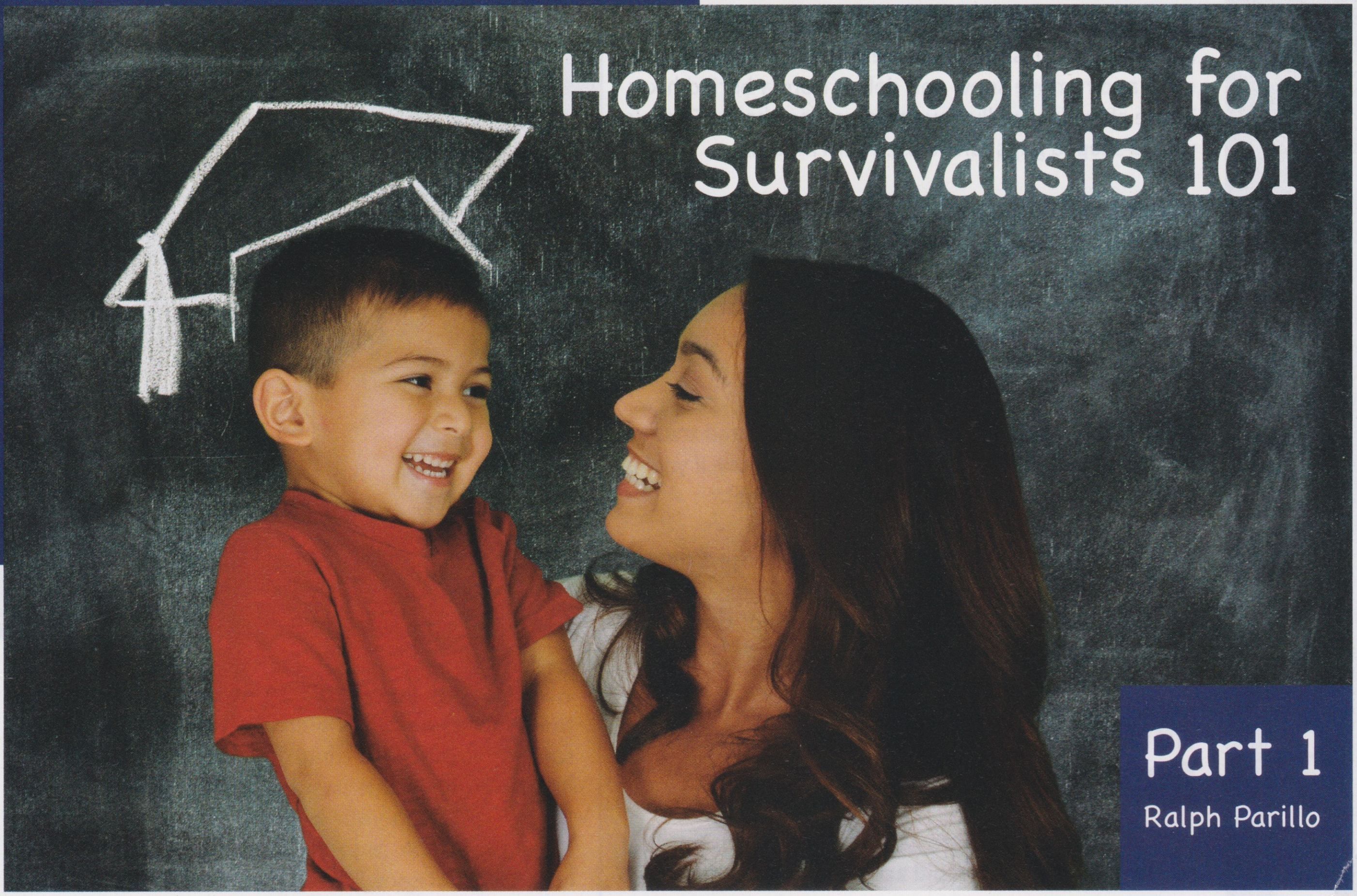
Swim! The key is to stay as close to the top of the snow as possible. Increase your surface area by spreading your legs (feet downhill) and raising your hands. While in this position, swing your arms while trying to stay on your back (it's easier to breathe if face-up), similar to swimming backstroke. With any luck, this strategy will keep you towards the surface of the snow.

What to do if Buried in the Snow

You did your best, but the snow was better. You're completely buried in it. You've got a little more than 15 minutes, on average, before you suffocate. Snow may be porous, but warm breath melts the snow which then refreezes as solid ice. This makes breathing difficult.

As the snow slows: The larger the air pocket you have, the longer you'll survive. As the snowslide slows to a stop, put one arm in front of your face in such a way as to form a space that will give you the most air. If possible, raise the other arm straight up toward the avalanche's surface. Your glove might signal your location to rescuers. Expand your chest by breathing deeply so that you have more room to breath once the snow has settled.

Once buried: Once you are completely buried, the snowpack may be so dense that it prevents you from moving. Stay calm, in order to use up less oxygen. If you're not sure which way is up, spit. The spit will go towards the ground due to gravity. If you can move, work to make a bigger air pocket in the direction of the surface.



Homeschooling for Survivalists 101

Part 1

Ralph Parillo

The Time to Homeschool your Children is NOW!

Your local schools are closed, your community is quarantined, and general panic ensues due to a deadly contagion gaining ground. What would you do? How would you handle your children's education?

Facing a modern world full of super viruses and super storms, preppers and non-preppers, alike, have come to realize that the above is no longer a far-fetched scenario. And though you may have cached food, water, and ammo, what have you prepared in the way of textbooks and school supplies? If you have kids, are you prepared for a long-term school closure? If you've considered home schooling but, as of yet, have not taken the plunge, your choice may soon be made for you by circumstances beyond your control. To prepare for the unpredictable can provide some semblance of manifesting your own destiny through your children's education. Do not ignore this often overlooked contingency.

Parents, it is time to have "the talk" with your kids...no, not that one. Discussing the positive and negative aspects of starting them on a home school program will help prepare them for the possibility. Regardless of age, your children must be made aware that any number of situations could occur at any time; situations which may result in an abrupt end to their school year. Hunkering down and waiting out a pandemic may be required. If you're thinking, "well, I don't want to scare the bejesus out of my kids," then know this: they need to be scared. A healthy survival mechanism hinges on fear. Children can handle more than you may think, especially if you demonstrate to them your own rock-solid courage in the face of adversity. As parents, and especially mothers, your job is to protect your children from the cold hard realities of modern life. But shielding your children will serve no one (least of all them), when a looming pandemic comes home to roost.

In the event that schools remain open during a pandemic, you must weigh the health risks of public school enrollment. Why wait until disaster strikes? Your kids are safer at home. Some in the media choose to minimize the danger that Ebola presents, regardless of the fact that the virus is classified as a Level 4 Biohazard, the most lethal classification. The CDC holds the patent and considers it a bioweapon. Ebola aside, with every other potentially life-threatening contagion, whether exotic or mundane, can you, in good conscience, justify sending your kids to a public school?

All humans are potential petri dishes, and schools in particular are virulent breeding grounds for germ-borne pathogens. The time to homeschool is now, before Ebola spreads this winter, and before your child unwittingly brings home an unwelcome schoolmate – the rider of the fourth horse of the apocalypse.

Only as a situation unfolds will you be made aware of the issues that crop up alongside your required course of action. For instance, if schools close, will you be at home with your children, or will you be working and in need of childcare? Can your family pool their resources – time, money, and expertise – with trusted relatives, friends, and neighbors to care for and teach your children? Instead of waiting for the sky to cave in, find yourself an umbrella: prepare for every possible scenario as best you can. Protecting your children's schooling is one of the most vital preparations, so maybe it's time to introduce yourself to that retired teacher or librarian down the street.

In the coming months, Homeschooling for Survivalists 101 will explore the options available to you, examining issues such as socialization, character-building, Common Core, the pros and cons of homeschooling versus public schooling, unschooling, homeschooling special needs children, how to teach core subjects as well as electives, the parent-child relationship in a survivalist homeschool environment, and the psychological aspects of homeschooling under duress in a post-collapse scenario. Take some initiative and get started today with the links provided below.

But, before we get down to business, a word of caution is necessary. In order to avoid the involvement of your state's child services agency, make sure you comply with your state's homeschooling laws. Some states have few regulations while other states will require more from you. Here is a very useful web resource at the Homeschool Legal Defense Association website that provides the salient information for all U.S. states: HSLDA | Homeschool Laws https://www.hslda.org/laws/Default.asp?

In the event of a quarantine, essential services like the internet will possibly remain available. In that case, a variety of online curricula will be accessible, including those provided by school districts. While you have the opportunity, inquire about the specifics of online curricula at your local school district meeting. Also available are a plethora of online homeschooling blogs, homeschooling communities, and support groups. Low-cost and free online curricula can be found, even those tailored to self-directed and unsupervised learning, which will train your children how to think, not just regurgitate facts. This type of curriculum is indispensable when the parent-teacher lacks expertise in a specific technical subject, such as physics or calculus, and if outside resources are not an option.

In a SHTF scenario wherein the internet is not functioning, you will need to have in your possession hardcopies of all educational tools and materials, either physical texts, computer downloads, or a combination of both. Used textbooks can be obtained on the cheap at online retailers, thrift stores, and used bookstores. Sometimes you can find them for free from associates, schools or libraries. When it comes to math, a ten-year-old algebra text is still relevant and useful, because facts don't change. And the same goes for nearly every subject (revised editions of school books are often just a scam to enrich the publishers and sellers). With modest effort, a collection of texts can be obtained for all years and subjects of your children's primary and secondary education.

A common concern for parents is whether or not a layperson has the ability to fulfill the vocational role of a professional? The answer is yes, you can! Countless families are homeschooling right now. And studies show that homeschoolers outperform public students in academic achievement by a wide margin.

Remember, as a parent, you are already a teacher in your children's eyes. The opportunity to bond more completely with your kids through this time spent together is a precious gift. And in the event of the collapse of civilization as we know it, homeschooling will offer a much needed respite from boredom and the difficulty and duress of the times.

Resource websites for online courses of study:

FREE SECULAR HOMESCHOOL CURRICULA

Khan Academy http://www.khanacademy.org/

Free Online School from Home: Connections Academy
http://www.connectionsacademy.com/free-online-public-school.aspx

Free World U, A Free Online pre K-12 Program
http://www.freeworldu.org/static/index.aspx

An Exciting New Way to Homeschool!
http://www.lessonpathways.com/info/homeschool

Discovery K12 | Love to learn! http://discoveryk12.com/dk12/

Highlights for High School | MIT OpenCourseWare | Free Online Course Materials http://ocw.mit.edu/high-school/

FEE-BASED SECULAR HOMESCHOOL CURRICULA

Homeschool, Afterschool, Summer Study - Time4Learning
http://www.time4learning.com/index.htm

Home | WinterPromiseWinterPromise http://winterpromise.com/

FREE CHRISTIAN HOMESCHOOL CURRICULA

AO Curriculum AmblesideOnline.org
http://amblesideonline.org/curriculum.shtml

An Old-Fashioned Education http://www.oldfashionededucation.com/

Easy Peasy All-in-One Homeschool | A complete, free online Christian homeschool for your family and mine http://allinonehomeschool.com/

Charlotte Mason Help: Free Curriculum
http://www.charlottemasonhelp.com/p/free-curriculum.html

Simply Charlotte Mason - Charlotte Mason method homeschool helps.
https://simplycharlottemason.com/

Mater Amabilis ▯ A PreK-8 Charlotte Mason Style Catholic Curriculum
http://materamabilis.org/ma/

FEE-BASED CHRISTIAN HOMESCHOOL CURRICULA

Christian Homeschool Curriculum, Homeschooling Curriculum - AOP
https://www.aophomeschooling.com/

FreedomProject Education https://fpeusa.org/

K-12 Homeschool Online - online homeschooling | christian homeschooling online | christian homeschool online - K-12 Christian Homeschool Academy http://www.k-12homeschoolacademy.org/

FREE LIBERTARIAN HOMESCHOOL CURRICULA

Saylor Academy http://www.saylor.org/

RonPaulCurriculum.com http://www.ronpaulcurriculum.com/

Robinson Booklist | Links to All Things Free for Homeschoolers
http://homeschoolfreestuff.wordpress.com/books-for-reading/robinson-booklist/

FEE-BASED LIBERTARIAN HOMESCHOOL CURRICULA

The official site of Thomas Jefferson Education by Oliver & Rachel DeMille http://www.tjed.org/

Homeschool Curriculum Excellence - Robinson Self-Teaching Homeschool Curriculum http://www.robinsoncurriculum.com/

DOES THE WORLD NEED TO KNOW YOUR PLANS?

SOCIAL MEDIA
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SCORE
LACEMENT
SULT
PROMOTION
SITIONING
BUG-OUT LOCATION
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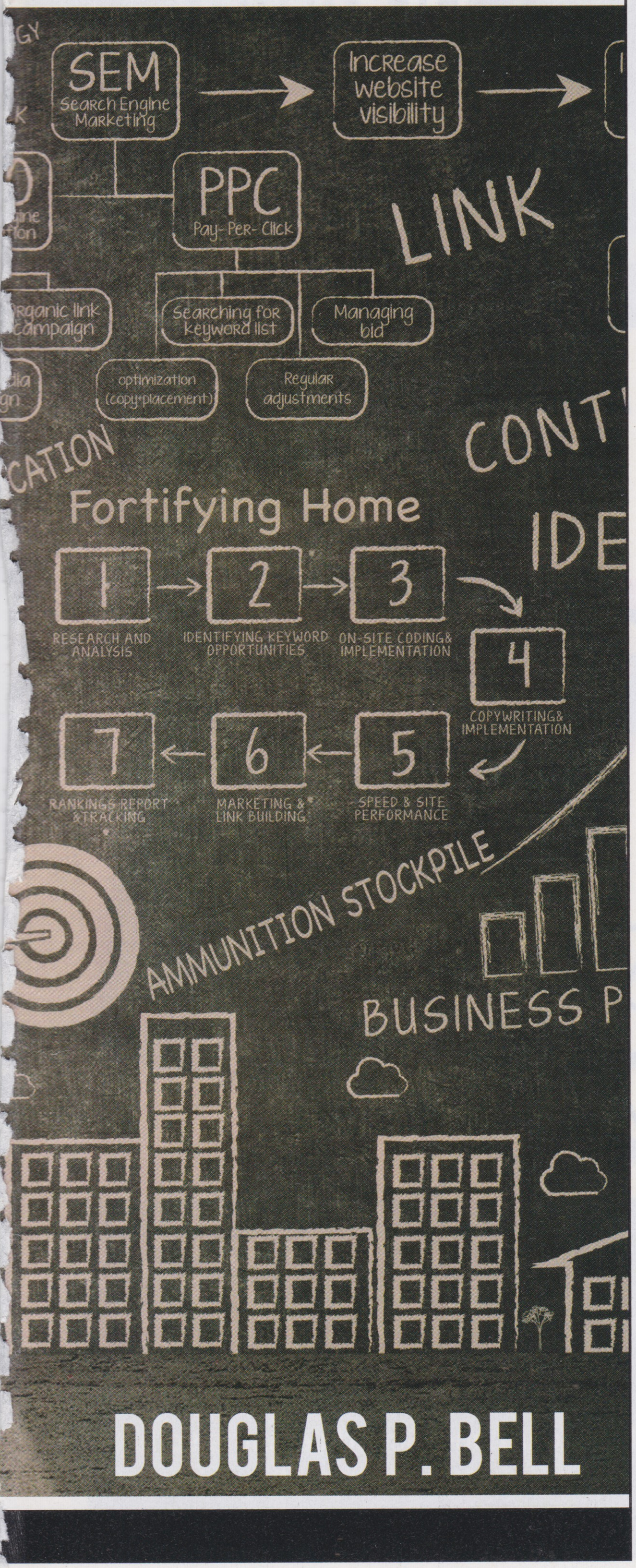
One thing that has always amazed me is the amount of information voluntarily made available online. Don't believe it? Simply take a scroll through myspace or facebook. You may notice that people expose their entire lives to every one of their virtual "friends"; friends who could very well be complete strangers or, even worse, the government. Involuntary personal information can also virtually be found. You can do a name search, look up police records, births, deaths, addresses. You can even look at maps with all the houses labeled with the name of the resident. All free. All online. All the time. The modern world was made for stalkers.

Of course, it was also made for narcissists, those people who love to broadcast. Most everyone enjoys talking about themselves. Just ask a few questions to get the pump primed and then sit back and enjoy...or, better yet, don't. Consider this: the vast majority of crimes would remain unsolved, if the criminal didn't race into the nearest bar and shout, "Hey! Guess what I just did!" We're a species of confessors. In our view, friends, family members, mere acquaintances and even complete strangers should know the minute details of our lives. Because we're just that interesting. The more extreme among us spill their life-stories for free, while the more private might give it all up for a chance to win a vacation or qualify for a credit card. Small bribes can turn out a gold mine of information.

Naturally, everyone's a critic...and a hypocrite. Perhaps a "hypocritic". Exhibit A: just before Y2K, while I, myself, didn't believe all the hype, I did encourage others to stockpile an emergency supply of food, water and other necessities in case there was a local power or water disruption, as has happened on a number of occasions. One person, in particular, continually scoffed at and ridiculed me for suggesting that anything would, or even could, happen. Even if it did, he'd say, the government would take care of us, so why bother?! Later I discovered he was stockpiling just about every Y2K item to come down the pike, which he confessed when I confronted him about it. He'd spent thousands of dollars secretly securing gear and supplies while openly attacking both me and prepping, in general, so that "no one would know and come to him for help."

Somewhere between the extremes – those who post or tweet about every single life event, and those secret squirrel loners who don’t talk to anyone or subscribe to magazines like this one, in order that “no one will know” and they “don’t end up on some government list” (...although that’s not as farfetched as one might think) – lies the mythical “sensible survivalist”, a person who though, while cautious and prepared, is not a paranoid secret-monger. While it’s unnecessary, and even stupid, to shout from the rafters that you have a hoard of food, gear and other supplies in your bunker, sharing your sensible survivalist nature will enable you to meet like-minded people who may potentially offer some stellar advice. Your neighbors may be as concerned about current events as you are, but if you don’t talk to them, you’ll never know. I’m not saying you need to spill everything or lay out your entire social collapse catalogue – you don’t want the neighborhood ready to come on over and loot the minute SHTF – but a friendly word or two isn’t going to wreak havoc on your prep plans. Simply comment on the unpredictable and erratic nature of the economy, the steep rate of inflation, and suggest that it might be a good idea to buy a few extra cans of food while it’s on sale. Mention that if the power goes out in the winter (like it did for me for three weeks one time), camping gear, like sleeping bags and camp stoves, could come in handy, along with some way to generate heat and light, such as a wood stove or kerosene heaters and lanterns. Then sit back and observe. If your audience scoffs at the idea of a well-stocked pantry or refuses to believe the power will ever go out or that anything bad could ever happen, don’t argue; agree to disagree and change the subject. You’re unlikely to convert anyone to sensibility. Attempting to teach a pig to sing only irritates the pig and wastes your time. The best outcome is that they’ll forget you ever brought it up. The worst outcome is that when SHTF, they remember your sensible survivalist nature and show up on your doorstep, expecting you to take them in after they attacked you and your views, badmouthing you all over the neighborhood and terming you one of those “crazy survivalist types.”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PPC
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Managing bid
optimization (copy-placement)
Regular adjustments
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CONT
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Fortifying Home
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2
IDENTIFYING KEYWORD OPPORTUNITIES
3
ON-SITE CODING & IMPLEMENTATION
4
COPYWRITING & IMPLEMENTATION
5
SPEED & SITE PERFORMANCE
6
MARKETING & LINK BUILDING
7
RANKINGS REPORT & TRACKING
AMMUNITION STOCKPILE
BUSINESS P

DOUGLAS P. BELL

This does, indeed, happen. Just take a look at a documentary of New Orleans during and after Hurricane Katrina. Whenever something unexpected happens – whether it be a super storm or a viral outbreak – the ill prepared show up expecting a hand-out (NOT a hand up!). When they do, don’t let compassion get the better of you. Gently tell them to take a hike. They can get their hand-out from the so-called friends who attacked and mocked you in their company. In any event, be prepared for a mob of losers and incompetents to attack you for your forethought and planning, and insist that they are “entitled” to your food and hard work, just as the government is “entitled” to redistribute your hard-earned money in order to keep these people in a lifestyle unaccustomed by those who’ve earned it themselves.

On the other hand, if your audience does show signs of interest, gently steer them to publications like this one. Although the Internet can be used for evil – the excessive transparency of personal information, for instance – it can also be used for good, such as online survivalist resources and web groups. Many newcomers are amazed to learn that they aren’t the only ones who believe the world is changing...and, in all likelihood, for the worst. While your first instinct may be to proceed with caution, never saying a word so that no one will expect anything from you when SHTF, in the long run, there’s safety in numbers and having friends who share your interests will improve your quality of life. Trying to go it alone is much more intimidating than having the support of a well-equipped and prepared group; so if you don’t have to fly solo, then don’t. Band together with other sensible survivalists, and you’ll have a forward-thinking army, prepared to face the future.

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